

# APPLY FOR SERVICES

OVERVIEW OF SIGNIFICANT PROGRAMS FOR  
DHS BENEFICIARIES

**MEDICAID**

**ARHOME**

**ARKIDS FIRST**

**TEFRA**

**CES WAIVER**

**AUTISM WAIVER**

**ARCHOICES**

**ASSISTED LIVING**

**CHILDCARE ASSISTANCE PROGRAM**

**SNAP**



# INTRODUCTION TO MEDICAID



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## What is Medicaid

Federal and state partnership that provides medically necessary services to eligible families and individuals based on financial need and/or health status. The federal government currently pays about 70 or 71 cents of every dollar Arkansas Medicaid spends. Money is paid to Medicaid providers like doctors, hospitals, therapists and more.

## Medicaid Eligibility

- Clients must meet income limits based on a percentage of the Federal Poverty Level (FPL) and the number of people in the family. These income limits vary by the type of Medicaid coverage.
- This ranges from less than 20% of FPL up to 250% FPL depending on the category.
- Higher income limits for children, pregnant women, and long term services and supports clients. Lower limits for other adults.
- Recipients must have a redetermination of their eligibility annually.
- Recipients are required to report changes in their circumstances within 10 days.
- Recipients of Long Term Services and Supports (LTSS) and other Traditional Medicaid services must meet asset limits in addition to income limits. They must also meet certain levels of institutional care requirements.

## How to Apply

- Online at [Access.Arkansas.gov](https://Access.Arkansas.gov)
- By phone at 855-372-1084
- By mail or in person at any DHS County office.

## What is Arkansas Health and Opportunity For Me (ARHOME)

ARHOME uses Medicaid dollars to buy private health care coverage for clients from qualified health plans. It focuses on improving clients' health, not just providing reliable health care coverage. ARHOME encourages clients to be an active partner with their health care plan and work together to reach important health and well-being goals.

## Accountability and Improved Outcomes

A joint legislative-executive branch advisory panel sets performance targets that the plans must meet each year. The plans use data to identify areas where they're behind and develop strategies—incentives, member education, provider rewards, or something else—to push for better care for ARHOME members.

## Special Programs: Life360 HOMEs

ARHOME, with approval from the Centers for Medicare and Medicaid Services (CMS), has also created a special program called Life360 HOMEs. Life360 HOMEs (also called Life 360s) will ensure clients in target populations are connected to medical services and nonmedical supports in their communities to address their social determinants of health through intensive care coordination.

There are three types of Life360s:

**Maternal Life360s** will support women whose Medicaid or Medicaid-funded Qualified Health Plan (QHP) claims reflect a diagnosis code of needing supervision for high-risk pregnancy. Intensive care coordination will be provided through the home-visiting program pre- and post-natal and will include the baby. Hospitals with obstetric units can be Life360s.

**Rural Life360s** will support individuals with mental illness or substance use disorder (SUD) who live in rural areas of the state by providing intensive care coordination through care coordination coaches at rural hospitals.

**Success Life360s** support young adults most at risk of long-term poverty and associated poor health outcomes due to prior incarceration, involvement with the foster care system, or involvement with the juvenile justice system and young adult veterans who are at high-risk of homelessness. The Success Life360 will provide intensive care coordination directly or contract with community organizations to do so.

## Who is Eligible

Arkansans between the ages of 19 and 64 who are not enrolled in Medicare and who earn less than 138 percent of the federal poverty level but more than 16 percent are eligible for ARHOME.



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# INTRODUCTION TO ARKIDS FIRST



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## What is ARKIDS First?

ARKIDS First is a health insurance program that provides coverage for hundreds of thousands of children across the state. It covers well-child checkups, eye exams, dental checkups and more. ARKIDS First covers many of the preventive services and medical care children may need, including important childhood immunizations and well-child checkups.

## Benefits

The ARKIDS program provides a full package of benefits under two coverage options based on family income: There is no charge when a child participates in ARKIDS A. For ARKIDS B, there are small co-payments required for some services.

## ARKIDS B

ARKIDS B is for children under age 19 who do not have medical insurance through a parent's employer, or who cannot use their medical insurance. For example, if a noncustodial parent living outside of Arkansas has health insurance on their child who lives in Arkansas but Arkansas doctors do not accept that insurance, the child may be able to get ARKIDS B.

## Income Limits

- ARKIDS A: 142 percent of the Federal Poverty Level
- ARKIDS B: 211 percent of the Federal Poverty Level



## What is TEFRA Home Care for Children?

The Tax Equity and Fiscal Responsibility Act (TEFRA) is a Medicaid program that can help families with certain children younger than 19 years old who have a disability receive care in their homes rather than an institution.

The TEFRA program can help pay for the cost of those services for eligible children. Some families do not have to pay anything as part of the program. Others pay a premium on a sliding scale, depending on their income. Children who live in an institution or receive extended care in an institution are not eligible for TEFRA.

## Who is Eligible

Approval for the TEFRA program is based on financial eligibility and a medical evaluation process to determine if all of the three requirements below are met.

**Disability Requirement:** A child must meet the Social Security Administration's (SSA) definition of disabled.

**Medical Necessity And Appropriateness Of Care Requirement:** The child must have a medical condition that would require institutional placement in a hospital, a skilled nursing facility, an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID), an Alternative Home placement, or be at risk for future institutional placement. Medical necessity is also based on services that improve or maintain a child's health or prevent a child's health from getting worse.

**Financial Requirement:** The child cannot have personal income that exceeds the Long Term Care Medicaid limit, which is three times the SSI income limit and can change each year. The child cannot have countable resources that exceed \$2,000. Countable resources for a child include cash on hand, bank accounts, vehicles, etc. Parental income and resources are not considered.



# INTRODUCTION TO TEFRA HOME CARE FOR CHILDREN



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# INTRODUCTION TO COMMUNITY & EMPLOYMENT SUPPORTS WAIVER



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## What is the Community & Employment Supports Waiver?

This waiver provides services that allow eligible individuals to remain in their homes and/or communities. This waiver is often referred to as the DDS waiver, and these services are called Home and Community Based Services (HCBS). They help individuals with developmental disabilities stay out of institutional settings.

## Who it Serves

This program serves nearly 5,000 clients and will add more than 3,000 clients within the next 3 years.

## How to Qualify

To qualify for this program, an individual must meet Medicaid income eligibility and have:

- Intellectual Disability (full scale IQ below 70), or
- Cerebral Palsy, or
- Seizure disorder (Epilepsy), or
- Autism,
- Down Syndrome
- Or other condition that causes one to function as if he or she has an Intellectual disability
- Substantial functional limitation in activities of daily living, such as:
- self-care, learning, self-direction, understanding and use of language, mobility or capacity for independent learning
- Age of onset-prior to age 22

## Services provided under CES Waiver

### Medicaid

- All State Plan Services for which they are eligible per program criteria
  - Personal care, prescription medications, therapies (children), day treatment programs, durable medical equipment, etc.

### Examples of Waiver Program Services

- Supportive Living
- Respite
- Supported Employment
- Adaptive Equipment
- Environmental Modification, specialized medical supplies, personal emergency response systems, specialized medical supplies, supplemental support

## What is the Autism Waiver?

The waiver provides intensive one-on-one treatment to children aged 18 months through seven years with a diagnosis of autism spectrum disorder. The services are designed to maintain the children in the home to avoid or postpone institutionalization.

## Who it Serves

Approximately 180 children are served through the Autism Waiver at any given point in time.

## Eligibility

The child cannot have personal income that exceeds the Long Term Care Medicaid limit, which is three times the SSI income limit and can change each year. The child cannot have countable resources that exceed \$2,000. Countable resources for a child include cash on hand, bank accounts, vehicles, etc. Parental income and resources are not considered.



# INTRODUCTION TO AUTISM WAIVER



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# INTRODUCTION TO ARCHOICES



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## What is ARChoices?

ARChoices is a Medicaid program that pays for home and community-based services for eligible adults ages 21 through 64 with a physical disability and seniors age 65 or older. These services offer help with everyday activities like bathing, dressing, getting around your home, preparing meals, or doing household chores.

## How to Qualify

To qualify for ARChoices, you must be:

- Age 21 through 64 with a physical disability OR Age 65 and older
- AND
- Meet established financial criteria.
  - Meet nursing home admission criteria at the intermediate level.
  - Have a need for at least one of the available services

## Income Limit

Income limit: \$2,523 monthly, and all applicants are treated as individuals for income purposes. Income of spouse and children are not counted.

## Available Services

**Attendant Care** – When someone helps you do the things like get out of bed, take a bath, get dressed, fix and eat meals, or use the bathroom

**Personal Emergency Response System (PERS)** – A call button you can use to get help in an emergency.

**Adult Day Services** – A place provides supervised care and activities during the day.

**Adult Day Health Services** – A place that provides skilled nursing, supervised care, and activities during the day.

**Facility-Based Respite Care** – A place that provides skilled nursing, supervised care, and activities during the day.

**In-Home Respite Care** – Someone to stay with you in your home for a short time so your caregiver can get some rest.

**Environmental Modifications** – Changes to your home that will help you get around more easily and safely like grab bars or a wheelchair ramp.



## What is Living Choices Assisted Living?

Living Choices Assisted Living is a Medicaid program that pays for apartment-style housing for people who need extra care and supervision. It's for people who are at risk of being placed in a nursing home or who already live in a nursing home and want more independence. Housing and care are provided by specially licensed assisted living facilities. The housing is designed to keep residents safe and comfortable. Staff members take care of the residents but try to let them make most of their own decisions. A portion of the resident's monthly income pays for room and board and towards the cost of care.

This program enables clients to live in an assisted living facility independently in their own apartment with 24-hour supervision and care. They can socialize and make new friends with folks living near them while still enjoying the privacy afforded by their own apartment.

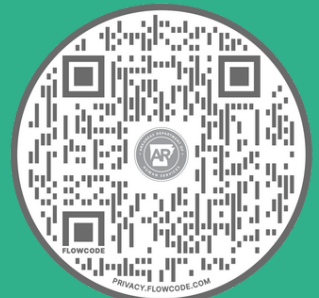
## Who is Eligible

Arkansans who are:

- Age 21 through 64 with a physical disability
- OR Age 65 and older.
- AND Meet established financial criteria.
- Meet nursing home admission criteria at the intermediate level.
- Have a need for at least one of the available services

## Income Limit

Income limit: \$2,523 monthly, and all applicants are treated as individuals for income purposes. Income of spouse and children are not counted.



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# INTRODUCTION TO CHILD CARE ASSISTANCE PROGRAM



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## What is the Child Care Assistance Program?

The Child Care Assistance Program provides financial assistance for quality child care for eligible working families.

## How to Qualify

In order to receive assistance:

- Families must meet income guidelines.
- Each adult residing in the household must be employed at least 30 hour per week, or be enrolled and attending high school, college, GED classes, vocational school or a training program as a full-time student. A combination of school and work is acceptable if the individual is involved at a minimum of 30 hours.
- Have an eligible child. This program serves children up to 12 years of age.

## Eligibility

Once a family is determined eligible for the Child Care Assistance Program, they must select a child care provider that is licensed or registered by the Division of Child Care and Early Childhood Education and participates in the program.

Families may contact the Program Eligibility Specialist to request a list of child care providers that participate in the Child Care Assistance Program or call 1-800-322-8176. Families may also use the Search for Child Care feature on the DHS website.



## What is SNAP?

The Supplemental Nutrition Assistance Program (SNAP) pays the cost of some groceries for eligible, low-income families. It is meant to supplement a family's monthly food budget to help prevent hunger and malnutrition. SNAP funding goes directly to grocers, and is not a cash assistance program.

## Benefits

Benefits are distributed through an Electronic Benefits Transfer (EBT) card, and they can be used to buy eligible food items for eating at home. Farmers markets are available for SNAP benefits as well as eligible retailers. In addition to food assistance, the program provides SNAP recipients with nutrition education, employment and training, and work experience in some cases.

The SNAP Employment and Training (E&T) program promotes self-sufficiency through employment. It helps any eligible SNAP participant with opportunities to gain knowledge and skills necessary to get and keep employment through participation in work programs and education/training activities such as GED and Basic Skills Education, English as a Second Language, Apprenticeship, and Internship Training programs. The SNAP E&T program is available in all 75 counties.

## SNAP Eligibility

All able-bodied adults between the ages of 18 through 49 who are not pregnant, or the parent of a minor dependent child must work at least twenty hours per week or participate in a work program.

### Gross Income Limits

Apply First to Households with no Elderly or Disabled Members (Regular Households)

Family size	Gross Monthly Income
1	\$ 1396
2	1888
3	2379
4	2871
5	3363
6	3855
7	4347
8	4839
9	5331
10	5823

### Net Income Limits

Apply to all Regular Households Who Meet the Net Income Limits and to Households with Elderly and /or Disabled Members

Family size	Monthly Income	Maximum Benefits
1	\$ 1074	250
2	1452	459
3	1830	658
4	2209	835
5	2587	992
6	2965	1190
7	3344	1316
8	3722	1504
9	4101	1692
10	4480	1880



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# CUSTOMER SERVICE

We are here to help clients get the information they need and to answer questions about services we provide. We maintain or partner with several call centers that help in this effort, including these listed below:

- **Access Arkansas Call Center: 1-855-372-1084** | For questions about applying for Health Care, SNAP, or TEA, or managing your case via the Access Arkansas online portal.
- **Adult Protective Services: 1-800-482-8049** | Report concerns about maltreatment, abuse, neglect or exploitation of impaired or endangered adults.
- **ARKids First Helpline: 1-888-474-8275** | For more information about applying for ARKids First or managing your existing coverage.
- **Child Care Assistance: 1-800-322-8176** | Request an application for assistance or learn more about child care providers that participate in the program.
- **Child Maltreatment Hotline: 1-800-482-5964** | If you suspect possible child maltreatment, report your concerns by calling this hotline. If there is any reason to suspect the life of a child is in immediate danger, contact the nearest local law enforcement agency or dial 911.
- **General Customer Assistance: 1-800-482-8988** | Clients needing help with Medicaid, eligibility, or other issues can call this general help number.
- **Medicaid Claims Questions: 1-800-482-5431** | Questions about whether Medicaid pays for a specific service can be directed to this number.
- **Mental Health & Addiction Support Line: 1-844-763-0198** | This hotline can connect clients with mental health and addiction providers in their area.

Contact information for additional call centers is posted at [humanservices.arkansas.gov/hotlines](https://humanservices.arkansas.gov/hotlines).

We also have offices in every county in the state to serve Arkansans where they live. Phone numbers and addresses for these offices are available at [humanservices.arkansas.gov/find-a-county-office/](https://humanservices.arkansas.gov/find-a-county-office/).

# CONSTITUENT SERVICE

To ensure legislators, sheriffs, county judges, and other elected officials can get the information they need to do their jobs, DHS has set up an Office of Legislative and Intergovernmental Affairs to serve as a direct contact to elected officials.

You can reach this office by calling **(501) 682-8650**.

# REPORTING FRAUD

DHS is committed to operating programs that follow state and federal rules, regulations, and policies. Fraud can lead to several problems, including draining programs of funding or resources that would be available to Arkansans in need. Fraud might include things like selling EBT benefits, lying or leaving out important information on an application to become a provider or client, or not reporting changes to DHS that could lead to a provider or client no longer being eligible to participate or be enrolled.

If client or provider fraud is suspected, please call **1-800-422-6641** or email [ContactDHSFraud@arkansas.gov](mailto:ContactDHSFraud@arkansas.gov).