

ARKANSAS REGISTER



JUN 14 10 10 AM '85

"BILL" McCUEN
SECRETARY OF STATE
LITTLE ROCK, ARKANSAS

FINAL RULE
Significant Change

Transmittal Sheet

W.J. "Bill" McCuen
Secretary of State
State Capitol
Little Rock, Arkansas 72201-1094

For Office
Use Only:

Effective Date June 24 1985 Code Number 016.06.85--038

Name of Agency Social Services

Department Human Services

Contact Person Jerry Wade Telephone 371-1208

Statutory Authority for Promulgating Rules Title V of the
Social Security Act, Arkansas Law 280 of 1939.

Intended
Effective Date

Date

Emergency

Legal Notice Published

5-4-85

20 Days
After Filing

Final Date for Public Comment

5-24-85

Other

Filed With Legislative Council

5-6-85

Reviewed by Legislative Council

Adopted by State Agency

6-11-85

CERTIFICATION OF AUTHORIZED OFFICER

I Hereby Certify That The Attached Rules Were Adopted
In Compliance With Act 434 of 1967 As Amended.

[Signature]
SIGNATURE

COMMISSIONER

TITLE

June 11, 1985

DATE



Arkansas Department of Human Services

Division of Social Services

Bill Clinton
Governor

Ray Scott
Director

Seventh and Main Streets
P.O. Box 1437
Little Rock, Arkansas 72203

Curtis L. Ivery
Commissioner

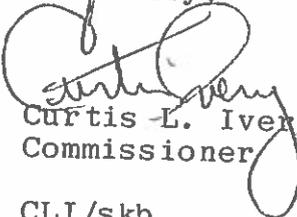
June 12, 1985

The Honorable W.J. "Bill" McCuen
Secretary of State
State of Arkansas
State Capitol Building
Little Rock, Arkansas 72201

Dear Mr. McCuen:

Pursuant to Act 434 of 1967 and Act 583 of 1973, Arkansas Social Services hereby issues the attached final rules governing revisions to the Crippled Children's State Plan.

Sincerely,


Curtis L. Ivery, Ed.D.
Commissioner

CLI/skb

Enclosures: 2 copies of rule
Transmittal Sheet
SS-1311

cc: Files

FINAL RULE
Change

ARKANSAS STATE PLAN
CRIPPLED CHILDREN'S SECTION

(Revised April 1985)

STATE OF ARKANSAS
Department of Human Services
Division of Social Services
Crippled Children's Section
P. O. Box 1437
Little Rock, Arkansas 72203

Phone: 371-2277

ARKANSAS CRIPPLED CHILDREN'S SECTION
STATE PLAN
INDEX

CRIPPLED CHILD - DEFINITION.	1
LEGAL BASIS.	1
DESIGNATION OF STATE AGENCY.	1
SEPARATE ORGANIZATIONAL UNIT	1
REVIEW AND APPROVAL OF STATE PLAN.	1
FUNDING.	2
MEDICAL DIRECTOR	2
MERIT SYSTEM - PERSONNEL	2
STANDARDS RELATING TO PERSONNEL AND FACILITIES	2
USE OF SUBPROFESSIONAL STAFF AND VOLUNTEERS.	2
USE OF OPTOMETRIST	2
COOPERATION WITH OTHER AGENCIES AND GROUPS	2
CONFIDENTIAL INFORMATION	3
EARLY IDENTIFICATION OF CHILDREN IN NEED OF HEALTH CARE AND SERVICES	3
REFERRALS FOR CRIPPLED CHILDREN'S SERVICES	3
APPLICATION FOR CRIPPLED CHILDREN'S SERVICES	3-4
FAILURE TO PROVIDE REQUESTED INFORMATION/DOCUMENTATION	4
ELIGIBILITY FOR CRIPPLED CHILDREN'S SERVICES	
AGE	4
RESIDENCE	4
FINANCIAL	4-5
MEDICAL ELIGIBILITY	5
OTHER FACTORS IN DETERMINING ELIGIBILITY.	5
ELIGIBILITY COMMITTEE.	6
DIAGNOSTIC SERVICES.	6
ELIGIBLE CONDITIONS FOR CRIPPLED CHILDREN'S SERVICES	6-7-8-9-10-11
ADDING OR DELETING CONDITIONS.	12
AUTHORIZATION FOR SERVICES	12
EMERGENCY SERVICES	12
APPLIANCES, PROSTHESES AND EQUIPMENT	12-13
DRUGS AND SUPPLIES	13
THERAPY SERVICES	13
FIELD CLINICS.	13
REIMBURSEMENT.	14
THIRD PARTY LIABILITY.	14
CLOSURES	14-15
APPEALS.	15
REPORTS.	15
SLIDING FINANCIAL SCALE.	16
LEGEND SHEET	17

STATE PLAN

ARKANSAS CRIPPLED CHILDREN'S SECTION

CRIPPLED CHILD - DEFINITION

- * A crippled child is an individual under 18 years of age who has a crippling physical defect (either congenital or acquired) or other condition calculated to produce such physical defects which may be benefitted by surgical or other medical procedures to the extent that the patient is able to achieve maximum physical and social function. In the cases of individuals with cystic fibrosis, CCS will provide both inpatient and outpatient treatment at Arkansas Children's Hospital for those 18 and older. Medication will be authorized up to the individuals 21st birthday. No medication or equipment will be purchased for the 21 and over age group unless special funds are provided.

Crippled Children's Services does not assume the responsibility for patients who have already been physically restored to the maximum extent possible or to those who require basically custodial care or institutionalized persons.

LEGAL BASIS

The legal basis for the operation of the Crippled Children's Program is vested in Arkansas Law 280 of 1939.

DESIGNATION OF STATE AGENCY

The Arkansas State Legislature has designated Arkansas Social Services, a Division of the Department of Human Services, with the responsibility for administration of Crippled Children's Services.

SEPARATE ORGANIZATIONAL UNIT

Crippled Children's Services is a separate organizational unit in the Office of Medical Services, Division of Social Services, Department of Human Services.

Crippled Children's services are provided statewide.

REVIEW AND APPROVAL OF STATE PLAN

The CCS State Plan is submitted to the State Health Planning Development Agency for review and approval.

Pursuant to Act 14 of 1965, the State Plan is filed through the Administrative Procedures, as required in the legislation.

FUNDING

CCS is funded by state and federal funds. Federal funds are provided under Title V, and the allotment is based on a formula for a fixed amount. The state funds are appropriated by the Arkansas Legislature and used to provide direct medical services for eligible children.

MEDICAL DIRECTOR

The Medical Director will be a physician licensed to practice in the State of Arkansas.

MERIT SYSTEM - PERSONNEL

All employees of the Crippled Children's Section will be certified by the Arkansas Merit System.

STANDARDS RELATING TO PERSONNEL AND FACILITIES

Health professionals providing patient services and diagnostic and treatment facilities for CCS' patients are required to meet state licensing or certification laws, and are in substantial accordance with national standards, as accepted by the Secretary or standards prescribed by the Secretary.

USE OF SUBPROFESSIONAL STAFF AND VOLUNTEERS

Crippled Children's Section will make an effort to train and use subprofessional staff, with a particular emphasis on employment of persons of low income. Volunteers are used at many CCS field clinics.

USE OF OPTOMETRIST

Where payment is authorized under the plan for services which an optometrist is licensed to perform, the individual for whom such payment is authorized may, to the extent practicable, obtain such service from an optometrist licensed to perform such services, except where such services are rendered in a clinic, or another appropriate institution which does not have an arrangement with optometrists so licensed.

COOPERATION WITH OTHER AGENCIES AND GROUPS

Crippled Children's Services will cooperate and coordinate with medical, health, nursing, educational, welfare groups and organizations, and with any State agency charged with administering state laws providing for vocational rehabilitation of physically handicapped children.

CONFIDENTIAL INFORMATION

All information obtained by the County Social Services and Central Office staff, as to personal facts and circumstances relating to patients, will be held to be confidential and will not be divulged without the individual's or parent's signed consent, except as will be necessary to provide appropriate treatment to individual patients.

EARLY IDENTIFICATION OF CHILDREN IN NEED OF HEALTH CARE SERVICES

Crippled Children's Services recognizes the importance of early identification of children in need of health care services to correct or ameliorate defects or chronic conditions that would lead to crippling.

An informative pamphlet describing the services available through CCS has been distributed throughout the state. Specific case finding activities are accomplished through referrals from private physicians, the local health department, schools, and EPSDT screening.

REFERRALS FOR CRIPPLED CHILDREN'S SERVICES

Any interested person or organization may refer a child for diagnosis and recommendation for treatment.

If possible, the referring party should submit a brief abstract of medical history to assist in routing the patient for examination and/or treatment, and in determining eligibility.

A release from the previous attending physician may be requested, but this release is not required for a preliminary examination and is not mandatory before active treatment is instituted.

APPLICATION FOR CRIPPLED CHILDREN'S SERVICES

- * Applications for Crippled Children's Services are completed by a worker in the County Social Services Office in the child's county of residence or by a hospital social worker who has been provided with the forms and instructed in filling them out.
- * It is required that a new reapplication be completed annually to review the family's financial and social status. This will be sent to the family to be filled out and returned to the CCS Office. If the financial status has changed, new financial verification must be provided to CCS by the close of the second month of the change. In the event of a move to another county, a reapplication must be completed within one month of the move. All changes of address must be reported immediately to the CCS Office.

The parent, legal guardian, or emancipated individuals under 18 years of age must complete, or supply information to complete the application. The signature of the parent, guardian, or emancipated individual under 18 constitutes authority for the Division to determine eligibility and to arrange for any recommended services or treatment within the scope of the Program.

APPLICATION FOR CRIPPLED CHILDREN'S SERVICES (continued)

In addition to the SS-800, two (2) signed SS-81's (Consent for Release of Information) must also be secured and forwarded, along with the original SS-800, to the Crippled Children's Services Section. The worker must sign as witness on the SS-800 and SS-81's.

If the child is a Medicaid recipient at the time a CCS Application is made, the child's Medicaid ID number must be entered on the application. If the applicant is not certified for Medicaid at the time the CCS Application is taken, they must be screened for potential Medicaid eligibility.

The Social Service Worker in the county office must forward the CCS Application to CCS Central Office for CCS' eligibility determination and notify CCS of the disposition of the Medicaid Application, including the amount of unmet liability necessary to qualify for Spend-Down on applicants who are not Medicaid eligible.

FAILURE TO PROVIDE REQUESTED INFORMATION/DOCUMENTATION

An applicant who refuses to complete a Medicaid Application when so instructed, or provide necessary information and/or documentation to determine Medicaid eligibility will not be accepted for CCS coverage. The applicant will be given thirty (30) days to supply requested information before the application is denied.

ELIGIBILITY FOR CRIPPLED CHILDREN'S SERVICES

- * AGE. A child must be under 18 years of age. All expenditures made by the Crippled Children's Services on behalf of a child, must be for services received prior to his/her 18th birthday (Unless CF). The single exception for this age limit is made for individuals with Cystic Fibrosis (CF). Individuals with a diagnosis of CF who are financially eligible for services, will be accepted for limited care after their 18th birthday. Inpatient and outpatient treatment at Arkansas Children's Hospital (ACH), and up until their 21st birthday, medication and equipment. After their 21st birthday, neither medication or equipment will be purchased unless special funds are provided for this purpose.

RESIDENCE. All children on the Crippled Children's Program must be residents of Arkansas. Patients moving into the state from out-of-state, where they have been on a Crippled Children's Program, will be required to complete an application for the Arkansas Program.

FINANCIAL. A child is considered financially eligible for CCS if his parent, spouse, legal guardian, or the family unit* meets the financial criteria under CCS' sliding income eligibility scale. Consideration is given to available income in connection with recognized standards of need and the extent to which available resources can be used to meet the current cost of medical care. The probable cost of the child's treatment will be a significant factor in determining financial eligibility.

A sliding scale established by CCS and updated periodically as budget permits will be the basis for financial eligibility. This sliding scale will also determine the level of CCS participation. In some situations, CCS will require the family to pay for specific portions of the child's treatment or care.

ELIGIBILITY FOR CRIPPLED CHILDREN'S SERVICES

FINANCIAL (continued)

The Central Office will review each case on it's own merits. Neither the local Social Services Office, or the hospital staff who take applications, will pre-screen these applicants. Each person is eligible to make an application.

MEDICAL ELIGIBILITY. To qualify medically for services under the auspices of the Crippled Children's Program, a patient must meet the definition of a crippled child. In addition, his medical need, must be such as to require the services of a physician or surgeon with specialized skills beyond the level of care provided by the family physician. If the available information indicates that the applicant may be eligible for medical services within the scope of the Program, an invitation will be sent for the child to secure a diagnostic examination at an appointed time and place in the geographic area in which he/she lives, or an invitation will be issued to a specialized clinic. Medical eligibility is determined following the report of such examination. Final determination of eligibility for treatment through CCS is made after a final diagnosis has been established. Acceptance of a patient for diagnostic coverage or treatment coverage will be considered separately. Scaled financial criteria considering projected treatment cost and criteria for the degree of medical severity must be satisfied to establish treatment coverage after the diagnostic requirements are met.

The medically eligible patient will be treated by CCS only for his/her eligible condition. Directly related medical or surgical services may be approved when necessary to prepare the patient to receive the authorized CCS treatment or when such services may enhance or preserve the recommended treatment.

An unrelated medical condition not classified as "eligible" in it's own right does not become eligible because the patient is accepted for treatment of another condition that is eligible.

*Definition of family unit for eligibility purposes: Those to be counted in the family unit will be any person(s) under age 18, living in the same household and depending upon the casehead for his/her livelihood.

OTHER FACTORS IN DETERMINING ELIGIBILITY

The acceptance of any case for treatment is dependent upon additional factors relating more particularly to the individual child. These factors include:

- Reasonable expectation of cure or restoration of useful function or facilitation of dependent care for handicapped child.
- Availability of accepted form of treatment.
- Priority of need for medical care as compared with other children potentially eligible for the program within the limitation of funds available.

LEGEND

A	Minor correctable conditions requiring services of a physician specialist.
B	Conditions requiring bracing, surgery, long-term medications, possibly PT, OT, ST.
C	Conditions requiring long-term outpatient treatment, bracing, shoes, surgery, urology supplies, medications, special diets, appliances, PT, OT, ST.
D	Conditions are the same as C, but the administration makes a decision once the CCS financial resources and the estimated cost of the illness in ratio to a family's total yearly income & their capability to pay have been reviewed.
E	Conditions are the same as C, but the child is accepted for services which do not constitute any financial outlay from CCS, such as case management, CCS clinics and loan of equipment.

FINANCIAL ELIGIBILITY

(FROM CCS STATE PLAN - REVISED FEBRUARY 1981)

A child is considered needy for CCS if his parent, spouse, legal guardian, or family unit* is unable financially to provide essential medical care in whole or in part. Consideration is given to available income in connection with recognized standards of need and the extent to which available resources can be used to meet the current cost of medical care. The probable cost of the child's treatment will be a significant factor in determining financial eligibility.

The Central Office will review each case on its own merits. The local Social Services Office will not pre-screen these applicants. Each person is eligible to make an application.

A sliding scale established by CCS and updated periodically, as budget permits, will be the basis for financial eligibility. This sliding scale will also determine the level of CCS' participation. In some situations, CCS will require the family to pay for specific portions of the child's treatment or care.

*Definition of family unit for eligibility purposes: Those to be counted in the family unit will be any person(s) under age 18, living in the same household and depending upon the casehead for his/her livelihood.