Division of Developmental Disabilities Services (DDS)
COVID-19 Response Manual

January 1, 2022
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200.000 OVERVIEW

201.000 Authority

The following rules are duly adopted and promulgated by the Division of Developmental Disabilities Services (DDS) of the Department of Human Services (DHS) under the authority of Arkansas Code Annotated §§ 20-48-606, 20-48-1003 and 25-10-129.

Applicable Guidance:

Families First Coronavirus Response Act (Public Law 116-127 – March 18, 2020)


Coronavirus Aid, Relief, and Economic Security (CARES) Act (Public Law No. 116-136 – March 27, 2020)

202.000 Purpose

In response to the COVID 19 pandemic, DDS identified programs and services that required additional flexibility or changes to adapt to ensuring the health and safety of our clients. This manual details them so that DHS may render uninterrupted assistance and services to our clients.

203.000 Appeals

Appeal requests for the Covid response policies must adhere to the policy set forth in the Medicaid Provider Manual Section 160.000 Administrative Reconsideration and Appeals which can be accessed at: https://medicaid.mmis.arkansas.gov/Provider/Docs/all.aspx

204.000 Severability

Each section of this manual is severable from all others. If any section of this manual is held to be invalid, illegal, or unenforceable, such determination shall not affect the validity of other sections in this manual and all such other sections shall remain in full force and effect. In such an event, all other sections shall be construed and enforced as if this section had not been included therein.
240.000 DEVELOPMENTAL DISABILITIES AND DELAYS

247.000 Attendance Payments for Adult Developmental Day Treatment and Early Intervention Day Treatment

Attendance payments are allowable for beneficiaries who attend the clinic in person that day. If a child or an adult attends an EIDT/ ADDT clinic, providers may bill one 15-minute unit encounter for $15.00, Place of Service (49), per beneficiary Monday – Friday.

These services will be available until the termination of the federal public health emergency, including any extensions, or December 31, 2022, whichever occurs first.

248.000 Community and Employment Support Waiver

In response to COVID-19 DMS/DDS will temporarily modify provider types to all Qualified Behavioral Health Paraprofessionals employed by Outpatient Behavioral Health Service Agencies to provide Supportive Living Services, including Supplemental Supports to PASSE members.

DMS/DDS further amended the CES Waiver to allow an extension for reassessments and reevaluations for up to one year past the due date; allow the option to conduct evaluations, assessments, and person-centered service planning meetings virtually/remotely in lieu of face-to-face meetings; and allow an electronic method of signing off on required documents such as the person-centered service plan.

These services will be available until the termination of the federal public health emergency, including any extensions, or December 31, 2022, whichever occurs first.
FINANCIAL IMPACT STATEMENT

PLEASE ANSWER ALL QUESTIONS COMPLETELY

DEPARTMENT  Department of Human Services
DIVISION Division of Developmental Disabilities Services (DDS)
PERSON COMPLETING THIS STATEMENT  Jason Callan

TELEPHONE (501) 320-6540  FAX  EMAIL: Jason.Callan@dhs.arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

SHORT TITLE OF THIS RULE Division of Developmental Disabilities Services (DDS) Manual Extension

1. Does this proposed, amended, or repealed rule have a financial impact?  Yes [ ]  No [x]

2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule?  Yes [x]  No [ ]

3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered?  Yes [x]  No [ ]

If an agency is proposing a more costly rule, please state the following:

(a) How the additional benefits of the more costly rule justify its additional cost;

(b) The reason for adoption of the more costly rule;

(c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;

(d) Whether the reason is within the scope of the agency’s statutory authority; and if so, please explain.

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

(a) What is the cost to implement the federal rule or regulation?

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<th>Current Fiscal Year</th>
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<td>General Revenue</td>
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Revised June 2019
(b) What is the additional cost of the state rule?

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5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

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6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

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7. With respect to the agency’s answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars ($100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

- Yes [ ]  
- No [X]  

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

1. a statement of the rule’s basis and purpose;

2. the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;

3. a description of the factual evidence that:
   (a) justifies the agency’s need for the proposed rule; and
   (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule’s costs;

4. a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
(5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;

(6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and

(7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
   (a) the rule is achieving the statutory objectives;
   (b) the benefits of the rule continue to justify its costs; and
   (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.