

# Exhibit G

## QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE

DEPARTMENT/AGENCY Department of Human Services  
DIVISION Division of Medical Services  
DIVISION DIRECTOR Andrew Allison, PhD  
CONTACT PERSON Robbie Nix  
ADDRESS P.O. Box 1437, Slot S295, Little Rock, AR 72203  
PHONE NO. 501-320-6427 FAX NO. 501-682-2480 E-MAIL robert.nix@arkansas.gov  
NAME OF PRESENTER AT COMMITTEE MEETING Marilyn Strickland  
PRESENTER E-MAIL marilyn.strickland@arkansas.gov

### INSTRUCTIONS

- A. Please make copies of this form for future use.
- B. Please answer each question completely using layman terms. You may use additional sheets, if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:

**Donna K. Davis**  
Administrative Rules Review Section  
Arkansas Legislative Council  
Bureau of Legislative Research  
One Capitol Mall, 5<sup>th</sup> Floor  
Little Rock, AR 72201

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- Rehabilitative Services for Persons with Mental Illness (RSPMI)
1. What is the short title of this rule? Update No. 2-14
  2. What is the subject of the proposed rule? The proposed rule allows for psychology interns to provide limited RSPMI services under appropriate supervision.
  3. Is this rule required to comply with a federal statute, rule, or regulation? Yes  No   
If yes, please provide the federal rule, regulation, and/or statute citation. \_\_\_\_\_
  4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? Yes  No   
If yes, what is the effective date of the emergency rule? \_\_\_\_\_  
  
When does the emergency rule expire? \_\_\_\_\_

Will this emergency rule be promulgated under the permanent provisions Yes  No

of the Administrative Procedure Act?

5. Is this a new rule? Yes  No   
If yes, please provide a brief summary explaining the regulation. \_\_\_\_\_

Does this repeal an existing rule? Yes  No   
If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does. \_\_\_\_\_

- Is this an amendment to an existing rule? Yes  No   
If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. Arkansas Statute 20-76-201

7. What is the purpose of this proposed rule? Why is it necessary? The purpose of the proposed rule is to allow for psychology interns to provide limited RSPMI services under appropriate supervision.

This update is necessary so that providers are aware of what provisions must be met in order for Medicaid payment to occur.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b).  
<https://www.medicaid.state.ar.us/InternetSolution/general/comment/comment.aspx>

9. Will a public hearing be held on this proposed rule? Yes  No   
If yes, please complete the following:

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Place: \_\_\_\_\_

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)  
May 24, 2014

11. What is the proposed effective date of this proposed rule? (Must provide a date.)  
September 1, 2014

12. Do you expect this rule to be controversial? Yes  No   
If yes, please explain. \_\_\_\_\_

13. Please give the names of persons, groups, or organizations that you expect to comment on these rules?  
Please provide their position (for or against) if known.  
Medical associations, interested providers and advocacy organizations. Their positions for or against is  
not known at this time.

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**FINANCIAL IMPACT STATEMENT**

**PLEASE ANSWER ALL QUESTIONS COMPLETELY**

**DEPARTMENT**     Department of Human Services  
**DIVISION**        Division of Medical Services  
**PERSON COMPLETING THIS STATEMENT**   Lynn Burton  
**TELEPHONE NO.**   682-1857     **FAX NO.**   682-2480     **EMAIL:**   lynn.burton@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**     Rehabilitative Services for Persons with Mental Illness (RSPMI) Update No. 2-14

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

**Current Fiscal Year**

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \$0 \_\_\_\_\_

Total \$0 \_\_\_\_\_

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total \$0 \_\_\_\_\_

Total \$0 \_\_\_\_\_

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.

**Current Fiscal Year**

**Next Fiscal Year**

\$ 0 \_\_\_\_\_

\$ 0 \_\_\_\_\_

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.

**Current Fiscal Year**

**Next Fiscal Year**

\$ 0 \_\_\_\_\_

\$ 0 \_\_\_\_\_

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

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.

**Summary for**  
**Rehabilitative Services for Persons with Mental Illness (RSPMI) Update No. 2-14**

**Effective September 1, 2014, Arkansas Medicaid proposes to update the Rehabilitative Services for Mental Illness (RSPMI) manual to allow for psychology interns to provide limited RSPMI services under appropriate supervision. This update is necessary so that providers are aware of what provisions must be met in order for Medicaid payment to occur.**





**213.010 Psychology Interns**

9-1-14

The Division of Medical Services will allow psychology interns to provide limited services under the following provisions:

RSPMI facilities must retain written documentation of each intern's:

- A. Enrollment in an American Psychological Association internship program that is fully accredited or accredited on contingency.
- B. Agreement with the Arkansas Psychology Board regarding oversight and supervision as defined by the American Psychological Association and the Arkansas Psychology Board (APB) Rules and Regulations.

**Supervision of psychology interns in the RSPMI Program**

The psychological procedures covered under the RSPMI Program are allowed as a covered service when provided by a psychology intern authorized by the Arkansas State Board of Psychology to provide such psychological services. When a psychology intern provides the services, the intern must be under the "direct supervision" of the supervising psychologist. For the purpose of psychological services only, the term "direct supervision" means the following:

- A. The supervising psychologist must monitor and be responsible for the quality of work performed by the psychology intern under his/her "direct supervision". The supervising psychologist must be immediately available to provide assistance and direction throughout the time the service is being performed. "Immediately available" is defined as the supervising psychologist being accessible to the psychology intern at any point during the supervisory relationship.
- B. Oversight:
  1. Each supervising psychologist must monitor and be responsible for the quality of the clinical work assigned to his/her supervisee (intern). Monitoring must include personal observation of randomly selected patient interactions;
  2. The supervising psychologist must assist and direct the intern in the delivery of internship services. Assistance and direction must comply with the American Psychology Association Guidelines and Principles for Accreditation of Programs in Professional Psychology and the Arkansas Psychology Board Rules and Regulations;
  3. Internship services will be provided under the license of the supervising psychologist; and
  4. The supervising psychologist must assure compliance with Medicaid laws, rules, and regulations, and be accountable for any noncompliance.

As a condition of Medicaid payment, claims must list the supervising psychologist as the performing provider. Provisions must be made requiring:

- A. The Arkansas Psychology Board to certify in writing that the psychology intern is receiving training in a qualified internship program for a prescribed period of time and this written certification shall be retained in the psychology intern's personnel record; and
- B. The accredited program's training director to certify in writing and retain in the psychology intern's personnel record:
  1. The requirements of the training program in which the intern is participating;
  2. The training dates for each intern;
  3. The name of each participating intern;



4. The name and Medicaid provider number of:
  - a. Each participant's supervising faculty member, or
  - b. The Medicaid-enrolled practice clinic in which the supervising faculty member participates; and
5. All services for which a Medicaid claim will be filed are provided under the supervision of a licensed psychologist who is in good standing with the Arkansas Psychology Board.

