

DEPARTMENT OF HUMAN SERVICES, DIVISION OF MEDICAL SERVICES
(Elizabeth Pitman)

SUBJECT: Prosthetics Rate Review – State Plan Amendment (SPA) and Prosthetics Provider Manual

REVISED DESCRIPTION:

Statement of Necessity

Current procedure code and rate review were requested by the Division of Medical Services (DMS). The review reflected outdated procedure codes and rates for reimbursement. The purpose of the revisions to the Prosthetics Provider Manual and the State Plan Amendment (SPA) is to improve alignment of Prosthetic and Orthotic supplies with current Medicare codes and rates for reimbursement, and to update the SPA to align with provider manuals. Medicaid will reimburse ninety percent (90%) of the current Arkansas Medicare non-rural rate. A rural rate will not be applied. Codes that do not have a Medicare comparable code or rate will be reimbursed at eighty percent (80%) of the Arkansas Blue Cross/Blue Shield (BCBS) rate unless manual pricing is otherwise documented using the provider invoice. The changes will allow an update of rates and align with Medicare codes to improve Medicare crossover billing.

Rule Summary

- Attachment 4.19-B Page 4c:
 - Added “Effective for dates of service on or after January 1, 2023, reimbursement rate maximums for orthotic appliances and prosthetic devices will be set at ninety percent (90%) of the January 1, 2022, Medicare non-rural rate for the State of Arkansas. For orthotic and prosthetic codes not listed on the Medicare fee schedule, reimbursement rate maximums for dates of service on or after January 1, 2023, will be set at eighty percent (80%) of the January 1, 2022, Arkansas Blue Cross/Blue Shield rate, or manually priced”;
 - Added a hyper link to the Medicaid Fee Schedules provider list.
- Prosthetics Provider Manual:
 - Updated Table of Contents – 212.212 and 212.213.
 - Section 212.212 Replaced “All ages” with “two (2) years of age and older”; and
 - Section 212.213 Replaced “Age two (2) through adulthood” with “two (2) years of age and older”.

Due to changes made to the rule based on advice received from CMS, DHS has provided an amended description of the rule. All other information in the Summary Agenda concerning the rule remains the same.