### EXHIBIT L

## <u>DEPARTMENT OF HUMAN SERVICES, DEVELOPMENTAL DISABILITIES</u> <u>SERVICES</u>

**SUBJECT:** Transportation 1-18 and State Plan Amendment #2018-009

**<u>DESCRIPTION</u>**: Beginning July 1, 2018, DDS is sunsetting the current Development Day Treatment Clinic Services (DDTCS) and Child Health Management Services (CHMS) and creating the Early Intervention Day Treatment (EIDT) and Adult Developmental Treatment (ADDT).

DDS is amending the Transportation Provider Manual to allow ADDT and EIDT providers to provide transportation services, just as the DDTCS providers were able to do under the previous program. This decision was based upon a cost analysis comparing the current DDTCS transportation utilization and rate to the utilization and rate under the non-Emergency Transportation (NET) currently used CHMS.

<u>PUBLIC COMMENT</u>: A public hearing was held on April 18, 2018. The public comment period expired on May 8, 2018. The Department received several Public Comments, an 84-page summary of which is also attached to the agenda online.

Specific comments and DDS responses on the TRANSPORTATION MANUAL include the following:

DAVID IVERS, DEVELOPMENTAL DISABILITIES PROVIDER ASSOCIATION (DDPA)

**COMMENT:** The rate for transportation has not been increased in eight years. Providers lose significant amounts of money providing transportation. No transportation broker provider would provide the transportation for the full EIDT rate, let alone as a subcontractor. This will create an access issue soon if not addressed.

**RESPONSE:** No transportation broker is needed. DDS will pay the rate directly to EIDT and ADDT providers to transport their own clients. We are currently engaging stakeholders in non-emergency transportation (NET) discussions. We are happy to discuss a future change of eliminating EIDT/ADDT transportation and putting everyone on the NET rate, if eligible.

**COMMENT**: 272.200 Mileage Calculation: The route taken when transporting the clients must be reasonable and must be planned to minimize the beneficiaries' time spent in route to and from the facility (i.e. must pick up the beneficiary farthest from the facility first and drop him or her off last). The provider must not take unnecessary extended routes to increase the mileage.

Why is the new language inserted? Providers lose money and only get paid for the client who lives the farthest, so what is the purpose of adding this?

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**RESPONSE:** The purpose of this additional language was to clarify that the rule is the provider is paid for the client who lives the farthest, not the client who spends the most amount of time in transport. In doing so, we want to ensure that clients, both children and adults with developmental delays and disabilities, do not spend more time than necessary in route to the day treatment program.

**COMMENT:** Page 8aa at 23.a.(3) The statement that: "The route must be planned to ensure that beneficiaries spend the least amount of time being transported" is ambiguous. Considering the financial status of the program, this concept would have to be balanced with the economic realities.

**RESPONSE:** Please see response above.

The Department does not yet have approval from CMS. The Department states in the summary that it will not sunset DDTCS or CHMS programs without CMS approval of the new programs.

The proposed effective date is July 1, 2018.

**FINANCIAL IMPACT**: There is no financial impact.

**LEGAL AUTHORIZATION:** The Department of Human Services is authorized to "make rules and regulations and take actions as are necessary or desirable to carry out the provisions of this chapter [Public Assistance] and that are not inconsistent therewith." Arkansas Code Annotated § 20-76-201 (12). DHS is authorized to establish and maintain an indigent medical care program. *See* Ark. Code Ann. § 20-77-107. DHS is also authorized to promulgate rules as necessary to conform to federal rules that affect its programs as necessary to receive any federal funds. *See* Ark. Code Ann. § 25-10-129(b).

The Department's Division of Developmental Disabilities Services ("DDS") is responsible for the overall coordination of services for Arkansans with developmental disabilities as defined in Ark. Code Ann. §20-48-101.

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

| DEPARTMENT/AGENCY   | Department of Hun                               | nan Services       |            |            |                          |          |
|---|---|--------------------|------------|------------|--------------------------|----------|
| DIVISION  | Division of Developmental Disabilities Services |                    |            |            |                          |          |
| DIVISION DIRECTOR   |   |                    |            |            |                          | _        |
| CONTACT PERSON  | Elizabeth Pitman                                |                    |            |            |                          |          |
| ADDRESS   | P.O. Box 1437, Slo                              | t N502             |            |            |                          |          |
| PHONE NO. (501) 682-4<br>NAME OF PRESENTER AT<br>MEETING  | 1936 FAX NO.<br>F COMMITTEE                     | (501) 682-<br>8380 | E-<br>MAIL | Elizabeth  | n.pitman@dhs.arkansas.go | <u>V</u> |
| Telephone Control of the Control of | oliggo store o dle e d                          |                    | sa Stone   |            |                          |          |
| I RESERVER E-MAIL WI  | elissa.stone@dhs.ark                            | ansas.gov          |            |            |                          |          |
|   | IN  | STRUCTIONS         | 5          |            |                          |          |
| <ul> <li>A. Please make copies of this form for future use.</li> <li>B. Please answer each question completely using layman terms. You may use additional sheets, if necessary.</li> <li>C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.</li> <li>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:</li> </ul>   |   |                    |            |            |                          |          |
| 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  |   |                    |            |            |                          |          |
| **************************************  | ·***************                                | ******             | ******     | ******     | *****                    |          |
| rule?   |   | on 1-18 and State  | e Plan Ame | endment #2 | 2018-009                 |          |
| Transportation 1-18 and State Plan Amendment #2018-009  2. What is the subject of the proposed rule?  EIDT and ADDT Transportation.   |   |                    |            |            |                          |          |
| 3. Is this rule required to compegulation?  If yes, please provide the fectation.   |   |                    | Yes [      |            | No 🖂                     |          |
| Was this rule filed under the emergency provisions of the Administrative Procedure Act?   |   |                    |            |            |                          |          |
| If yes, what is the effective rule?   | date of the emergenc                            |                    | Yes [      |            | No 🖂                     |          |
| When does the emergency rexpire?  | rule<br>  |                    |            |            |                          | _        |
|   |   |                    |            |            |                          |          |

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act?

| 5. Is this a new rule? Yes \( \subseteq \text{No } \text{\infty}  |
|---|
| If yes, please provide a brief summary explaining the regulation.   |
| Does this repeal an existing rule? Yes No 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 I  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." |
| The Transportation Provider Manual is being changed to reflect that EIDT and ADDT providers will be able to provide transportation services similar to those provided by DDTCS centers now.   |
| 6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. A.C.A. 20-77-107   |
| 7. What is the purpose of this proposed rule? Why is it necessary? <u>Because DDTCS</u> is sunsetting on July 1, 2018, and the transportation must be allowed for EIDT and ADDT programs.   |
| 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). <a href="http://humanservices.arkansas.gov/ddds/Pages/default.aspx">http://humanservices.arkansas.gov/ddds/Pages/default.aspx</a>     |
| 9. Will a public hearing be held on this proposed rule? Yes ⊠ No ☐ If yes, please complete the following:   |
| Date: April 18, 2018  |
| Time: _5:00 p.m.  |
| Central Arkansas Library, Darragh Center Auditorium, 100 Rock Street, Place: Little Rock, AR  |
| 10. When does the public comment period expire for permanent promulgation? (Must provide a date.)  May 8, 2018  |
| 11. What is the proposed effective date of this proposed rule? (Must provide a date.) July 1, 2018  |
| 12. Please provide a copy of the notice required under Ark. Code Ann. § 25-15-204(a), and proof of the publication of said notice.  |
| 13. Please provide proof of filing the rule with the Secretary of State and the Arkansas State Library as required pursuant to Ark. Code Ann. § 25-15-204(e).   |

14. 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. Unknown.

Yes

No 🗌

### FINANCIAL IMPACT STATEMENT

### PLEASE ANSWER ALL QUESTIONS COMPLETELY

| DE  | PEPARTMENT Arkansas Department of Human Services   |   |                                |                                |  |                       |                  |                  |
|---|--|---|--------------------------------|--------------------------------|--|-----------------------|------------------|------------------|
| DI  | VISIO  | ON  | Division of                    | Developmental                  | l Disabilities   | Services              |                  |                  |
| PE  | RSO  | N COMPI   | ETING THI                      | S STATEMEN                     | NT Elizabe   | th Pitman             |                  |                  |
| TE  | LEPI   | HONE <u>50</u>  | 1-682-4936                     | FAX 501-6                      | 682-8380   | EMAIL: Eliz           | zabeth.pitman@   | dhs.arkansas.gov |
| To  | com<br>d file  | ply with A<br>two copies  | rk. Code Ann.<br>with the ques | § 25-15-204(e) tionnaire and p | ), please com<br>proposed rule   | plete the follows.    | ing Financial In | npact Statement  |
| SE  | IORT   | TITLE (   | OF THIS RUI                    | LE Transporta                  | ation 1-18 an  | d State Plan An       | nendment #2018   | 3-009            |
| 1.  | Doe  | oes this proposed, amended, or repealed rule have a financial impact? Yes \( \subseteq \text{No } \subseteq \)  |                                |                                |  | No 🖂                  |                  |                  |
| 2.  | econ   | 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 |   |                                |                                | No 🗌   |                       |                  |                  |
|   | If an  | agency is   | proposing a m                  | ore 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)  | 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:                                      |   |                                |                                |  |                       | no:              |                  |
|   | (a) What is the cost to implement the federal rule or regulation?  |   |                                |                                |  |                       |                  | -6.              |
| <u>Cu</u>   | rrent  | Fiscal Ye   |                                |                                |  | t Fiscal Year         |                  |                  |
| Federal Funds Cash Funds Special Revenue Other (Identify) |  | 0<br>0<br>0<br>0  |                                | Gen Fede Casi Spec             | eral Revenue<br>eral Funds<br>n Funds<br>cial Revenue<br>er (Identify) | 0<br>0<br>0<br>0<br>0 |                  |                  |
| Total 0 Total 0   |  |   | 0                              |                                |  |                       |                  |                  |

|  | (b) What is the additional cost of the state rule?  |   |                               |  |  |  |
|--|---|---|-------------------------------|--|--|--|
|  | Current Fiscal Year   | Next Fiscal Year  |                               |  |  |  |
|  | General Revenue 0 Federal Funds 0 Cash Funds 0 Special Revenue 0 Other (Identify) 0   | General Revenue<br>Federal Funds<br>Cash Funds<br>Special Revenue<br>Other (Identify)   | 0<br>0<br>0<br>0              |  |  |  |
|  | Total0  | Total   | 0                             |  |  |  |
| 5.<br><u>C</u>   | What is the total estimated cost by fiscal year to any priproposed, amended, or repealed rule? Identify the entit they are affected.  urrent Fiscal Year  0   | ivate individual, entity (ies) subject to the position of the | proposed rule and explain how |  |  |  |
| 6.   | What is the total estimated cost by fiscal year to state, rule? Is this the cost of the program or grant? Please current Fiscal Year  | county, and municipa<br>explain how the gove<br>Next Fiscal Year  | rnment is affected.           |  |  |  |
| \$   |   | \$ 0  | <del>.</del>                  |  |  |  |
| 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? |   |                               |  |  |  |
|  | Y   | 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 pra a rule is required by statute;   | e problem the agency seeks to address with the proposed rule, including a statement of whether rule is required by statute;   |                               |  |  |  |
|  | <ul><li>(3) a description of the factual evidence that:</li><li>(a) justifies the agency's need for the proposed</li><li>(b) describes how the benefits of the rule meet the rule's costs;</li></ul>  |   | objectives and justify        |  |  |  |

- (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 OF TRANSPORTATION MEDICAID PROVIDER MANUAL

Beginning on July 1, 2018, DDS is sunsetting the current Developmental Day Treatment Clinic Services (DDTCS) and Child Health Management Services (CHMS) and creating the Early Intervention Day Treatment (EIDT) and Adult Developmental Day Treatment (ADDT).

DDS is amending the Transportation Provider Manual to allow ADDT and EIDT providers to provide transportation services, just as the DDTCS providers were able to do under the previous program. This decision was based upon a cost analysis comparing the current DDTCS transportation utilization and rate to the utilization and rate under the Non-Emergency Transportation (NET) currently used CHMS.