Proposed Rule Change for Speech, Occupational and Physical Therapy

2016 Fact Sheet

What changes are proposed?

The proposed rule allows Medicaid-eligible children and adults, including those with developmental and intellectual disabilities or delays, who qualify for services and have a prescription to get (without the need for prior authorization):

* 90 minutes a week of speech therapy, * 90 minutes a week of occupational therapy, and * 90 minutes a week of physical therapy.

Anything above the 4.5 hours total per week would require the provider to get prior authorization, which is a common practice for other Medicaid services and among private insurance carriers.

What if my child qualifies for more services?

If your child needs these services, there will be an easy and quick way for your child's provider to get additional services approved because we know that early intervention as well as ongoing therapeutic services are extremely important for those with developmental and intellectual disabilities or delays.

We are working with Arkansas clinicians who are experts in these fields to develop the prior authorization process. The details of that process are not yet available because we are in the beginning stages of this proposed change. As soon as those details are available, we will share them with everyone who attended the public hearing or provided feedback on the proposal.

Why are these changes being proposed?

The DHS Division of Developmental Disabilities Services began this summer looking at programs that could be run more efficiently. These particular therapeutic services have no limitations to accessing services in Arkansas, unlike many other states. Not all states offer Medicaid coverage for all three types of therapies, and some states, including Mississippi, require prior authorization before any access is allowed. This proposed change was developed with the support of Arkansas clinicians who currently serve this population in center-based, schoolbased and individual outpatient settings.

This also is part of a larger effort by DHS and the State to ensure that the Medicaid program is sustainable in the long-term. We know Medicaid provides life-saving and life-changing services. We need to make sure we are spending taxpayer dollars on all programs wisely so that it is here for future generations that need it.



What happens next?

Once the public comment period ends on Nov. 14, the Department of Human Services will review all comments that were submitted and determine what, if any, changes need to be made to the proposed rule. DHS also will respond to all comments in writing at this point. Rules such as this one also must be reviewed and approved by the Arkansas Legislature. A date for review has not yet been set. Once the rule is reviewed by the Legislature, it would be included in Arkansas's Medicaid State Plan, which is submitted to the federal government.

Public Comment

We appreciate getting feedback on this proposal and will be accepting public comment through Nov. 14, 2016. It can be emailed to: melissa stone@dhs arkansas.gov.

