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| all provider notifications |
| [View or print notifications for all provider types.](https://humanservices.arkansas.gov/wp-content/uploads/Static_O.docx) |

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| Home Health transmittal letters |
| Update Number | Date |
| [HOMEHLTH-3-23](https://humanservices.arkansas.gov/wp-content/uploads/HOMEHLTH-3-23.doc) | June 1, 2025 |
| [HOMEHLTH-2-23](https://humanservices.arkansas.gov/wp-content/uploads/HOMEHLTH-2-23.doc) | August 1, 2024 |

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| Home Health NOTICES OF RULE MAKING |
| Number | Date | Subject |
| [NOTICE-003-17](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-003-17.doc) | November 1, 2017 | Removal of Processing Hold on Paper Claims |
| [NOTICE-003-15](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-003-15.doc) | December 18, 2015 | 2015 Healthcare Common Procedural Coding System Level II (HCPCS) Code Conversion |
| [NOTICE-003-14](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-003-14.doc) | June 15, 2014 | 2014 Healthcare Common Procedural Coding System Level II (HCPCS) Code Conversion |
| [NOTICE-002-13](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-002-13.doc) | March 15, 2013 | 2013 Healthcare Common Procedural Coding System Level II (HCPCS) Code Conversion |
| [NOTICE-002-12](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-002-12.doc) | May 11, 2012 | 2012 Healthcare Common Procedural Coding System Level II (HCPCS) Code Conversion |

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| Home Health Official Notices |
| Number | Date | Subject |
| [ON-042-23](https://humanservices.arkansas.gov/wp-content/uploads/ON-042-23.doc) | October 6, 2023 | Procedure Code A9274 |
| [ON-038-23](https://humanservices.arkansas.gov/wp-content/uploads/ON-038-23.doc) | September 25, 2023 | Procedure Code A7508 |
| [ON-014-21](https://humanservices.arkansas.gov/wp-content/uploads/ON-014-21.doc) | November 10. 2021 | COVID-19 Vaccination Shots for Home-Bound Medicaid Clients |
| [ON-012-21](https://humanservices.arkansas.gov/wp-content/uploads/ON-012-21.doc) | September 30, 2021 | T4534 (Youth size pull-on) Will be Covered Effective 10/1/2021 |
| [ON-001-15](https://humanservices.arkansas.gov/wp-content/uploads/ON-001-15.doc) | June 1, 2015 | Transition of the Retrospective Therapy Reviews and Prior Authorizations for Personal Care Under 21 |
| [DMS-2010-I-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-10-A-5.doc) | March 29, 2010 | 2010 HCPCS Procedure Code Conversion |
| [DMS-2009-I-8](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-AR-8.doc) | March 1, 2009 | 2009 HCPCS Procedure Code Conversion |
| [DMS-2008-I-6](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-C-3.doc) | July 1, 2008 | Transition of the Retrospective Therapy Reviews and Prior Authorizations for Personal Care under 21 |
| [DMS-2008-I-7](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-8.doc) | June 9, 2008 | Implementation of the Federal Deficit Reduction Act of 2005, Requiring National Drug Codes (NDC) when Billing Drug HCPC/CPT Codes and Extension of the Implementation of the Federal Deficit Reduction Act of 2005, Requiring National Drug Codes (NDC) When Billing Drug Procedure Codes for Institutional Outpatient Provider Claims. |
| [DMS-2008-I-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-4.doc) | May 1, 2008 | 2008 HCPCS Procedure Code Conversion |
| [DMS-2008-I-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-5.doc) | March 21, 2008 | April 1, 2008 is the effective date for implementation of the Tamper-Resistant Prescription Pads Requirement under the Medicaid Program |
| [DMS-2008-I-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-B-1.doc) | February 15, 2008 | Fee Schedules  |
| [DMS-2008-I-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-1.doc) | January 14, 2008 | Extension of the Implementation of the Federal Deficit Reduction Act of 2005, Requiring National Drug Codes (NDC) When Billing Drug Procedure Codes for Institutional Outpatient Provider Claims |
| [DMS-2007-I-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-A-5.doc) | October 24, 2007 | Implementation of the Federal Deficit Reduction Act of 2005, Requiring National Drug Code (NDC) When Billing Drug Procedure Codes |
| [DMS-2007-I-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-AR-1.doc) | March 1, 2007 | 2007 HCPCS Procedure Code Conversion |
| [DMS-2006-I-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-2.doc) | March 1, 2006 | 2006 HCPCS Procedure Code Conversion |
| [DMS-2004-I-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-AR-3.doc) | November 1, 2004 | Revision of Form DMS-640 |
| [DMS-2004-I-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-AR-2.doc) | April 22, 2004 | Recoupment of Overpayment for Occupational, Physical and Speech Therapy Services |
| [DMS-2003-I-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-AR-3.doc) | October 7, 2003 | Occupational, Physical, Speech Therapy Program Policy |
| [DMS-2003-I-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-I-2.doc) | October 3, 2003 | HIPAA Corrections Required for Provider Manual Updates Effective October 13, 2003  |

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| Home Health RA messages |
| Date | Subject |
| [10/23/14-11/20/14](https://humanservices.arkansas.gov/wp-content/uploads/141023.doc) | Form DMS-640 - Occupational, Physical and Speech Therapy for Medicaid Eligible Beneficiaries Under Age 21 Prescription/Referral |
| [08/22/13-09/05/13](https://humanservices.arkansas.gov/wp-content/uploads/130822.doc) | No reimbursement for L8605 in Home Health |