To: Arkansas Medicaid Enrolled Prosthetics (DME and Orthotics)

Date: May 22, 2019

Subject: Enrollment Process for Community and Employment Support (CES) Waiver

Provider Type: 72 Environmental Modifications/Adaptive Equipment

Provider Type: 73 Specialized Medical Supplies Provider Type: 67 Supplemental supports

General Information:

Current Arkansas Medicaid Enrolled Providers in the Prosthetic (DME and Orthotics) Program are needed to meet needs of members enrolled in the Arkansas Provider-led Arkansas Shared Savings Entity (PASSE) Program. Services that will be rendered under this program may include (but not be limited to) the ordering, and delivery of specialized medical supplies, physical aids or adaptive equipment to a member in accordance with the member's Person Centered Services Plan (PCSP) as authorized through the PASSE program utilization review process.

Process for Enrollment:

To enroll, any willing provider must:

- Obtain certification through the Division of Developmental Disabilities Services as a CES
 Waiver provider by submitting the CES Provider Certification Application and providing
 supporting documentation as listed in the application to
 DHS.DDS.Central@DHS.Arkansas.Gov. The application may be found on the DDS
 website at the following URL https://humanservices.arkansas.gov/about-dhs/ddds/waiver-services. Questions regarding completion of the CES Provider
 Certification Application may be directed to Linda.G.Wilson@dhs.arkansas.gov.
- Currently enrolled DME providers will be able to add a specialty to provider enrollment profile to allow billing for waiver specialized medical supplies only.
- New DME providers can follow instruction for enrollment with Arkansas Medicaid.
 Instructions and provider enrollment portal may be accessed at the following URL https://medicaid.mmis.arkansas.gov/Provider/Enroll/Enroll.aspx. This provider type does require fingerprint background check and site visits in addition to all provider enrollment requirements.
- Make note of and send tracking number issued by portal to <u>Linda.G.Wilson@dhs.arkansas.gov</u> so that it can be recorded on your DD application file.

Questions concerning this process may be directed to <u>Linda.G.Wilson@dhs.arkansas.gov</u>

For new DME providers to enroll, all provider enrollment rules will be followed including fingerprint background screening process.