



October 17, 2024

Re: Provider Appeals Process

Providers,

Empower Healthcare Solutions would like to remind all providers of the method for submitting appeals:

- Once a provider receives an adverse determination notice from Empower Healthcare Solutions, providers may either request a reconsideration from Empower or request a hearing from the Arkansas Department of Health Office of Medicaid Provider Appeals.
 - Please note that if a request for a hearing from the Arkansas Department of Health Office of Medicaid Provider Appeals is made by the provider, this will bypass Empower's reconsideration process completely.
- The request for *either* the reconsideration through Empower or the hearing through the Arkansas Department of Health Office of Medicaid Provider Appeals must be submitted in writing within **35 calendar days** from the date of the notice of adverse decision/action.
- The request for a reconsideration through Empower must include a copy of the adverse decision notice received from Empower and any additional documentation to support medical necessity.
- If the reconsideration is denied by Empower, the provider has **35 calendar days** to submit a request for a hearing to the **Arkansas Department of Health, Office of Medicaid Provider Appeals**.

Provider appeals must be submitted to:

**Arkansas Department of Health
Office of Medicaid Provider Appeals
4815 West Markham Street, Slot 31
Little Rock, AR 72205
FAX: 501-661-2357**

- The request for a hearing with the Arkansas Department of Health Office of Medicaid Provider Appeals must include the notice of adverse determination received from Empower and a statement explaining the reason for the appeal.

All provider appeals are conducted by the Arkansas Department of Health. **Providers should not send provider appeals to the DHS Office of Appeals and Hearings.** Please ensure that all staff are educated about this requirement.



This information is documented in the Provider-Led Arkansas Shared Savings Entity (PASSE) Provider Agreement (Section 4.9.7) found at <https://humanservices.arkansas.gov/wp-content/uploads/PASSE-Agreement-2023-FINAL.pdf>. You may also contact your assigned DMS PASSE Compliance Liaison or the DMS Assistant Director of Plan Compliance at the email addresses below with any questions or concerns you may have.

Shamia Rafter (Liaison for **Arkansas Total Care** and **Empower**) shamia.rafter@dhs.arkansas.gov

Chawnte Booker, DMS Assistant Director of Plan Compliance chawnte.booker@dhs.arkansas.gov

With other questions, you may contact Empower Provider Relations at empowerhealthcaresolutionspr@empowerarkansas.com.

Thank you,

Empower Healthcare Solutions