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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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| Ambulatory Surgical Center transmittal letters | | |
| Update Number | Date |
| [ASC-1-23](https://humanservices.arkansas.gov/wp-content/uploads/ASC-1-23.doc) | June 1, 2025 |

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| Ambulatory Surgical Center 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-002-15](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-002-15.doc) | December 18, 2015 | 2015 Current Procedure Terminology (CPT®) 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-002-14](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-002-14.doc) | June 15, 2014 | 2014 Current Procedure Terminology (CPT®) Code Conversion |
| [NOTICE-003-13](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-003-13.doc) | September 1, 2013 | Coverage of Influenza Virus Vaccine Current Procedural Terminology (CPT®) Procedure Codes 90654, 90685, 90686, and 90688 |
| [NOTICE-001-13](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-001-13.doc) | March 15, 2013 | 2013 Current Procedure Terminology (CPT®) 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-001-12](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-001-12.doc) | May 11, 2012 | 2012 Current Procedure Terminology (CPT®) 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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| Ambulatory Surgical Center Official Notices | | | |
| Number | Date | Subject |
| [ON-019-25](https://humanservices.arkansas.gov/wp-content/uploads/ON-019-25.docx) | June 26, 2025 | REVISED – Obstetrics (OB) Services Billing Changes (Global/ Itemized) and Postpartum Visits |
| [ON-047-24](https://humanservices.arkansas.gov/wp-content/uploads/ON-047-24.doc) | December 11, 2024 | Upper Airway Stimulation |
| [ON-041-24](https://humanservices.arkansas.gov/wp-content/uploads/ON-041-24.doc) | November 1, 2024 | Coverage for Procedure Code 23472 |
| [ON-017-24](https://humanservices.arkansas.gov/wp-content/uploads/ON-017-24.doc) | May 23, 2024 | Prior Authorization (PA) Required for Procedure Codes 76981-76983 |
| [ON-005-21](https://humanservices.arkansas.gov/wp-content/uploads/ON-005-21.doc) | June 29, 2021 | ASC Procedure Code Table |
| [ON-006-12](https://humanservices.arkansas.gov/wp-content/uploads/ON-006-12.doc) | July 1, 2012 | Medicaid Payment Adjustment for Provider-Preventable Conditions Including Health Care-Acquired Conditions |
| [ON-003-11](https://humanservices.arkansas.gov/wp-content/uploads/ON-003-11.doc) | March 15, 2011 | 2011 Healthcare Common Procedural Coding System Level II (HCPCS) Code Conversion |
| [ON-002-11](https://humanservices.arkansas.gov/wp-content/uploads/ON-002-11.doc) | March 15, 2011 | 2011 Current Procedure Terminology (CPT®) Code Conversion |
| [ON-006-10](https://humanservices.arkansas.gov/wp-content/uploads/ON-006-10.doc) | October 11, 2010 | Medicaid Coverage of Procedure Code 90662 |
| [DMS-2010-A-6](https://humanservices.arkansas.gov/wp-content/uploads/DMS-10-A-6.doc) | April 26, 2010 | Coverage of Human Papilloma Virus (HPV) Vaccine (Quadrivalent) for male Medicaid Beneficiaries Ages 9 years through 18 years and Human Papilloma Virus (HPV) Vaccine (Bivalent) for female Medicaid Beneficiaries Ages 9 years through 18 years |
| [DMS-2010-A-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-10-A-5.doc) | March 29, 2010 | 2010 HCPCS Procedure Code Conversion |
| [DMS-2010-A-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-10-A-4.doc) | March 29, 2010 | 2010 CPT Procedure Code Conversion |
| [DMS-2009-A-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-3.doc) | November 6, 2009 | Vaccines for Children Program (VFC) |
| [DMS-2009-A-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-2.doc) | September 1, 2009 | Medicaid Coverage of H1N1 Vaccine Administration |
| [DMS-2009-A-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-1.doc) | August 31, 2009 | Billing for the Essure Procedure and/or Device |
| [DMS-2009-A-13](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-AR-8.doc) | March 1, 2009 | 2009 HCPCS Procedure Code Conversion |
| [DMS-2009-A-12](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-12.doc) | March 1, 2009 | 2009 CPT Procedure Code Conversion |
| [DMS-2008-A-11](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-11.doc) | November 18, 2008 | ARKids First-B Wellness Screen Indicator Added to Eligibility Response |
| [DMS-2008-A-10](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-10.doc) | November 10, 2008 | Vaccines for Children Program |
| [DMS-2008-A-9](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-9.doc) | August 7, 2008 | Medicaid Tamper Resistant Requirement Guidance from the Centers for Medicare and Medicaid (CMS) and the National Council for Prescription Drug Programs (NCPDP) |
| [DMS-2008-A-8](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-A-6](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-6.doc) | June 1, 2008 | Current Procedural Terminology (CPT) Code 90702 |
| [DMS-2008-A-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-4.doc) | May 1, 2008 | 2008 HCPCS Procedure Code Conversion |
| [DMS-2008-A-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-2.doc) | May 1, 2008 | 2008 CPT Procedure Code Conversion |
| [DMS-2008-A-7](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-AL-1.doc) | April 1, 2008 | Fee Schedules |
| [DMS-2008-A-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-A-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-A-5](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-A-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-A-4.doc) | October 18, 2007 | Family Planning Services |
| [DMS-2007-A-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-A-3.doc) | October 1, 2007 | Tamper-Resistant Prescription Pads Under the Medicaid Program |
| [DMS-2007-A-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-A-2.doc) | March 1, 2007 | 2007 Current Procedural Terminology (CPT) Procedure Code Conversion |
| [DMS-2007-A-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-AR-1.doc) | March 1, 2007 | 2007 HCPCS Procedure Code Conversion |
| [DMS-2006-A-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-5.doc) | July 10, 2006 | Vaccines Available in the Vaccines for Children (VFC) Program |
| [DMS-2006-A-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-4.doc) | June 20, 2006 | Family Planning Services |
| [DMS-2006-A-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-2.doc) | March 1, 2006 | 2006 HCPCS Procedure Code Conversion |
| [DMS-2006-A-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-1.doc) | March 15, 2006 | 2006 CPT Procedure Code Conversion |
| [DMS-2004-A-7](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-7.doc) | May 20, 2005 | Gastrointestinal Tract Imaging with Endoscopy Capsule |
| [DMS-2005-A-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-05-A-1.doc) | April 4, 2005 | 2005 CPT Procedure Code Conversion |
| [DMS-2004-A-6](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-6.doc) | November 8, 2004 | CPT Procedure Code 43843 Made Non-Payable |
| [DMS-2004-A-8](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-8.doc) | October 15, 2004 | Influenza Virus Vaccine, for Intranasal Use |
| [DMS-2004-A-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-3.doc) | October 1, 2004 | Coverage of Zoledronic Acid Injection (J3487) Prior Authorization of Procedure Codes 15342 and 15343 |
| [DMS-2004-A-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-5.doc) | August 2, 2004 | Retroactive Reimbursement of Vaccines Made Available Through the Vaccines for Children (VFC) Program September 1, 2003 |
| [DMS-2004-A-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-1.doc) | February 27, 2004 | 2004 CPT Procedure Code Conversion |
| [DMS-2003-A-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-A-2.doc) | December 9. 2003 | Requirements for Requests for Extension of Benefits for Clinical, Outpatient, Laboratory and X-ray Services |
| [DMS-2003-A-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-A-4.doc) | December 5, 2003 | Vaccines Available in the Vaccines for Children (VFC) Program |
| [DMS-2003-A-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-A-3.doc) | October 3, 2003 | HIPAA Corrections Required for Provider Manual Updates Effective October 13, 2003 |

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| Ambulatory Surgical Center RA messages | |
| Date | Subject |
| [06/26/25-07/10/25](https://humanservices.arkansas.gov/wp-content/uploads/250626.docx) | Obstetrics (OB) Services Billing Changes (Global/Itemized) and Postpartum Visits |
| [05/22/25-06/05/25](https://humanservices.arkansas.gov/wp-content/uploads/250522.docx) | Age Update for Procedure Code 90739 HEPB VACC 2/4 DOSE ADULT IM |
| [05/08/25-05/22/25](https://humanservices.arkansas.gov/wp-content/uploads/250508.docx) | Coverage Updates for Procedure Codes J0741 and J1324 |
| [08/06/15-08/13/15](https://humanservices.arkansas.gov/wp-content/uploads/150806.doc) | ARKids-B Beneficiaries No Longer Eligible For VFC Program Beginning August 1, 2015 |
| [05/28/15-06/04/15](https://humanservices.arkansas.gov/wp-content/uploads/150528.doc) | ARKids-B Beneficiaries No Longer Eligible for VFC Program Beginning August 1, 2015 |
| [12/18/14-02/26/15](https://humanservices.arkansas.gov/wp-content/uploads/141218.doc) | Vaccines for ARKids First-B Beneficiaries |
| [11/20/14-01/29/15](https://humanservices.arkansas.gov/wp-content/uploads/141120.doc) | Vaccines for ARKids-B |
| [06/26/14-07/24/14](https://humanservices.arkansas.gov/wp-content/uploads/140626.doc) | ASC Billing Requirements |
| [05/08/14-05/29/14](https://humanservices.arkansas.gov/wp-content/uploads/140508.doc) | Procedure Code 77417 |
| [08/01/13-08/29/13](https://humanservices.arkansas.gov/wp-content/uploads/130801.doc) | Pen and Ink Correction |
| [05/10/12-05/31/12](https://humanservices.arkansas.gov/wp-content/uploads/120510.doc) | Administration Fee |
| [02/23/12-03/01/12](https://humanservices.arkansas.gov/wp-content/uploads/120223.doc) | Procedure Codes 15121 and 29826 |
| [11/13/08-11/20/08](https://humanservices.arkansas.gov/wp-content/uploads/081113.doc) | CPT Code 90660 |
| [11/13/08-11/20/08](https://humanservices.arkansas.gov/wp-content/uploads/081113.doc) | Supplemental Eligibility Response System |
| [10/02/08-10/09/08](https://humanservices.arkansas.gov/wp-content/uploads/081002.doc) | Procedure Code 90698 – Ages Covered Under VFC Correction |
| [03/13/08-03/20/08](https://humanservices.arkansas.gov/wp-content/uploads/080313.doc) | Rule Clarification Regarding Post-Essure (CPT 58565) Service |
| [06/29/06-07/05/06](https://humanservices.arkansas.gov/wp-content/uploads/060629.doc) | Family Planning Procedure Codes 99144 and 99145 |