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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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| Rural Health Clinic transmittal letters | | |
| Update Number | Date |
| [RURLHLTH-1-25](https://humanservices.arkansas.gov/wp-content/uploads/RURLHLTH-1-25.docx) | July 1, 2025 |
| [RURLHLTH-2-23](https://humanservices.arkansas.gov/wp-content/uploads/RURLHLTH-2-23.doc) | June 1, 2025 |

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| Rural Health Clinic 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-005-15](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-005-15.doc) | March 1, 2016 | Coverage of Vaccine Current Procedure Terminology (CPT®) Procedure Codes 90620 and 90621 |
| [NOTICE-002-15](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-002-15.doc) | December 18, 2015 | Current Procedure Terminology (CPT®) Code Conversion |
| [NOTICE-004-15](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-004-15.doc) | October 1, 2015 | Coverage of Vaccine Current Procedure Terminology (CPT**®**) Procedure Code 90651 |
| [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-001-12](https://humanservices.arkansas.gov/wp-content/uploads/NOTICE-001-12.doc) | May 11, 2012 | 2012 Current Procedure Terminology (CPT®) Code Conversion |

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| Rural Health Clinic 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-039-24](https://humanservices.arkansas.gov/wp-content/uploads/ON-039-24.doc) | October 11, 2024 | Vaccine and Immunization Coverage |
| [ON-009-24](https://humanservices.arkansas.gov/wp-content/uploads/ON-009-24.doc) | March 28, 2024 | Coverage for Procedure T1015 Medication Assistance Treatment (MAT) Services (X2 & X4 Modifiers) |
| [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-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-OO-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-10-OO-5.doc) | April 30, 2010 | Billing Basic and Interperiodic Family Planning Visits; and EPSDT and ARKids First-B Medical Screenings |
| [DMS-2010-OO-4](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-OO-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-10-A-4.doc) | March 29, 2010 | 2010 CPT Procedure Code Conversion |
| [DMS-2009-OO-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-3.doc) | November 6, 2009 | Vaccines for Children Program (VFC) |
| [DMS-2009-OO-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-2.doc) | September 1, 2009 | Medicaid Coverage of H1N1 Vaccine Administration |
| [DMS-2009-OO-11](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-12.doc) | March 1, 2009 | 2009 CPT Procedure Code Conversion |
| [DMS-2008-OO-10](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-OO-9](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-10.doc) | November 10, 2008 | Vaccines for Children Program |
| [DMS-2008-OO-7](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-AR-4.doc) | September 1, 2008 | Correct Billing for Vaccines for Children (VFC) |
| [DMS-2008-OO-8](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-OO-6](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-OO-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-6.doc) | June 1, 2008 | Current Procedural Terminology (CPT) Code 90702 |
| [DMS-2008-OO-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-2.doc) | May 1, 2008 | 2008 CPT Procedure Code Conversion |
| [DMS-2008-OO-4](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-OO-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-OO-6](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 Codes (NDC) When Billing Procedure Codes |
| [DMS-2007-OO-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-A-4.doc) | October 18, 2007 | Family Planning Services |
| [DMS-2007-OO-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-OO-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-O-1.doc) | April 11, 2007 | Human Papilloma Virus Vaccine for female Medicaid Beneficiaries Aged 9 through 18 |
| [DMS-2007-OO-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-OO-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-AR-1.doc) | March 1, 2007 | 2007 HCPCS Procedure Code Conversion |
| [DMS-2006-OO-4](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-OO-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-4.doc) | June 20, 2006 | Family Planning Services |
| [DMS-2006-OO-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-1.doc) | March 15, 2006 | 2006 CPT Procedure Code Conversion |
| [DMS-2005-OO-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-05-O-1.doc) | January 1, 2006 | Prescription Drug Coverage for Dual Eligibles Covered by Medicare |
| [DMS-2005-OO-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-05-CA-2.doc) | December 1, 2005 | 2006 ICD-9-CM Diagnosis Codes |
| [DMS-2004-OO-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-O-3.doc) | December 8, 2004 | Evidence-Based Preferred Drug List |
| [DMS-2004-OO-5](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-8.doc) | October 15, 2004 | Influenza Virus Vaccine, for Intranasal Use |
| [DMS-2004-OO-4](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-OO-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-A-1.doc) | February 27, 2004 | 2004 CPT Procedure Code Conversion |
| [DMS-2003-OO-7](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-OO-9](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-OO-10](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-O-11.doc) | November 25, 2003 | Medicaid Reimbursement for Flu Vaccines Administered to Recipients Ages 19 and Older |
| [DMS-2003-OO-8](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-O-8.doc) | August 12, 2003 | Extension of Pharmacy Benefit for Living Choices Assisted Living Waiver Participants |
| [DMS-2003-OO-6](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-O-6.doc) | July 9, 2003 | DEA Schedule II Stimulants for Age-Appropriateness |
| [DMS-2003-PP-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-PP-1.doc) | June 12, 2003 | PCP Referral Requirement for Mental Health Services and PCP Referrals for Retroactively Eligible Individuals |
| [DMS-2003-OO-4](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-O-4.doc) | June 6, 2003 | Prescription Drug Prior Approval for Long Term Care Certified Recipients |

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| Rural Health Clinic 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 |
| [04/24/25-05/08/25](https://humanservices.arkansas.gov/wp-content/uploads/250424.docx) | RHC Lab Codes 87426, 87428, 87636, 87637, and 87811 |
| [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 |
| [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 |
| [11/13/08-11/20/08](https://humanservices.arkansas.gov/wp-content/uploads/081113.doc) | CPT Code 90660 |
| [10/02/08-10/09/08](https://humanservices.arkansas.gov/wp-content/uploads/081002.doc) | Procedure Code 90698 – Ages Covered Under VFC Correction |
| [06/29/06-07/05/06](https://humanservices.arkansas.gov/wp-content/uploads/060629.doc) | Family Planning Procedure Codes 99144 and 99145 |