



ARKANSAS TEFRA-LIKE
Section 1115
Project Number 11W001636

QUARTERLY & ANNUAL REPORT

October 1, 2020-December 31, 2020
January 1, 2020- December 31, 2020



ARKANSAS TEFRA-Like WAIVER Section 1115
Project Number: 11W-001636
Jan. – Dec. 2020 Annual Year-End Report

Demonstration/Annual Reporting Period: 01/1/2020-12/31/2020
Demonstration Year: 18th year (01/01/20 – 12/31/20)
Demonstration Year Quarter: 4th Quarter/2020 (10/01/20 – 12/31/20)
Federal Fiscal Quarter: 1st Quarter/2021 (10/01/20 – 12/31/20)

I. Introduction

The goal of the TEFRA demonstration is to provide medical services to disabled children eligible for Medicaid under section 134 of the Tax Equity and Fiscal Responsibility Act (TEFRA). The demonstration helps children who meet the requirements for institutionalization to remain in their homes. The TEFRA waiver was initially approved for a 5-year demonstration period (01/01/2003 – 12/31/2007) and has been extended multiple times since then. The current TEFRA extension renewal was approved May 9, 2018, and extends the demonstration waiver through Dec. 31, 2022. **ATTACHMENT E-4** explains the eligibility procedures, medical services policies, along with the application.

II. Enrollment Information

A. Enrollment Information for Demonstration Year Jan. 1 – Dec. 31, 2020

In 2020, 6,155 unduplicated beneficiaries were enrolled in TEFRA at some point during the year.

	Enrollment
Quarter January – March 2020	5,297
Quarter April – June 2020	5,421
Quarter July – Sept. 2020	5,574
Quarter Oct. – Dec. 2020	5,671

The following table provides information on the timeliness of initial applications for TEFRA eligibility. The timeliness for renewal applications cannot be assessed. The Division of County Operations' eligibility system was recently converted to a new system, and the new system does not contain the data necessary to assess renewal timeliness history from the legacy system.

	2020			
	Q1	Q2	Q3	Q4
Timely applications (processed within 90 days)	391	264	373	308
Total applications determined	470	283	400	351
Mean days to process	59.12	46.94	54.44	61.38
Maximum days to be processed	416	183	147	179
Minimum days to be processed	0	0	0	0

III. **Reevaluation Information**

Reevaluation Information for Quarter Oct. – Dec. 2020

Quarter Oct. – Dec 2020

During the **Oct. – Dec. 2020 quarter**, there have been **642** TEFRA demonstration beneficiaries found eligible to continue the demonstration after a new medical/appropriateness of care assessment was completed at the time of reevaluation.

Reevaluation Information for Demonstration Year Jan. 1 – Dec. 31, 2020

	TEFRA beneficiaries determined eligible to continue the demonstration after a new medical/appropriateness of care assessment was completed at the time of reevaluation
Quarter Jan. - March 2020	341
Quarter April – June 2020	618
Quarter July – Sept. 2020	279
Quarter Oct. – Dec. 2020	642

IV. **Premiums Information**

Premiums Information for Quarter Oct. – Dec. 2020

Quarter Oct. – Dec. 2020

- A. During the **quarter Oct. – Dec. 2020**, there were **0** TEFRA demonstration beneficiaries whose cases were closed due to non-payment of premiums.
- B. During the **quarter Oct. – Dec. 2020**, there were **0** TEFRA demonstration beneficiaries who were reinstated into the demonstration via a new application after their TEFRA cases had been closed due to non-payment of premiums.
- C. During the **quarter Oct. – Dec. 2020**, there were **0** TEFRA demonstration beneficiaries absolved of overdue premiums after 12-month reinstatement.

Premiums Information for Demonstration Year Jan. 1 – Dec. 31, 2020

	Beneficiaries whose cases were closed due to non-payment of premiums	Beneficiaries reinstated into the demonstration via a new application after their TEFRA cases had been closed due to non-payment of premiums	Beneficiaries absolved of overdue premiums after 12-month reinstatement
Quarter Jan. - March 2020	42	23	23
Quarter April – June 2020	0	13	13
Quarter July – Sept. 2020	0	8	8
Quarter Oct. – Dec. 2020	0	0	0

V. Outreach/Innovative Activities

A. Outreach/Innovative Activities During Quarter Oct. - Dec. 2020

Arkansas Foundation for Medical Care (AFMC), a contract agent with the Division of Medical Services performed outreach and monitoring activities.

See ATTACHMENT A-1 listing outreach activities performed by AFMC during the quarter

B. Outreach/Innovative Activities During Demonstration Year Jan. 1 – Dec. 31, 2020

See ATTACHMENT A-2 listing outreach activities performed by AFMC during the demonstration year

VI. Operational/Policy Development/Issues

The TEFRA program, like all Medicaid programs, struggled in 2020 with operational issues related to the COVID pandemic. The extension of Medicaid coverage, an increase in new applications as unemployment increased, county office closures, and staff adjustments to working remotely presented new challenges in 2020 for processing Medicaid applications.

There were no state legislative developments in 2020 affecting the TEFRA Demonstration.

Demonstration Year Jan. 1 – Dec. 31, 2020

Despite the challenges of the public health emergency, the TEFRA Demonstration continued improving operations, as documented by the TEFRA Beneficiary Satisfaction Survey conducted by AFMC, Arkansas's contracted vendor. The 2020 TEFRA Beneficiary Satisfaction Survey was sent to 1,650 TEFRA clients. Improvement is evident in the TEFRA composite measure that assesses the TEFRA application process. The composite measure represents the percentage of respondents who responded positively to a combination of survey questions about a particular topic. The application process composite measure increased 2 percentage points in 2020 to 55% from the 2019 measure of 53%. The customer service composite measure also showed improvement by 10 percentage points from 2019.

2019 - 2020 TEFRA Survey Comparison	2020	2019	Percentage Point Change
TEFRA Customer Service	76%	66%	+10%
TEFRA Application Process	55%	53%	+2%

Public Forums

No public forums were held this quarter nor during the 2020 year. The public health emergency caused significant disruption during 2020 and prohibited in-person public forums. However, details about the TEFRA program were shared during more than 60 beneficiary education presentations conducted by contracted vendor AFMC. Most of the 2020 beneficiary education presentations occurred prior to the public health emergency.

VII. Consumer Issues/Appeals & Fair Hearings

The Arkansas Medicaid program uses its vendor, Arkansas Foundation for Medical Care (AFMC), to accept and process grievances and complaints for all program types, including TEFRA. However, AFMC has not had a process in place to categorize and filter grievances and complaints by the type of Medicaid program at issue. AFMC is establishing a tracking process that will allow for the identification of grievances and complaints related to the TEFRA program, and the Arkansas Department of Human Services (DHS) will report TEFRA-related grievances and complaints in the future.

There were no audits, investigations, or lawsuits related to the TEFRA demonstration in 2020.

Consumer Issues for Quarter Oct. – Dec. 2020

For the **Quarter Oct. – Dec. 2020**, there were 14 appeal requests received by the Office of Appeals and Hearings

Medicaid/MRT/TEFRA 2 Appeals received

0 appeal requests found in favor of the client
1 appeal request found in favor of the agency
1 appeal request withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

Medicaid TEFRA 2 Appeals received

0 appeal requests found in favor of the client
1 appeal request found in favor of the agency
1 appeal request withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

TEFRA 10 Appeals received

3 appeal requests found in favor of client
2 appeal requests found in favor of agency
5 appeal requests withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending
concerning consumer issues during the **quarter Oct. – Dec. 2020**

Appeals & Fair Hearings for Demonstration Period Jan. 1 – Dec. 31, 2020

Quarter Jan. – March 2020

For the **Quarter Jan. – March 2020**, there were 16 appeal requests received in the Office of Appeals and Hearings:

Medicaid/MRT/TEFRA 1 Appeals received

0 appeal requests found in favor of the client
0 appeal requests found in favor of the agency
1 appeal request withdrawn
0 appeal requests abandoned by client

0 appeal requests open and pending

Medicaid TEFRA 0 Appeals received

0 appeal requests found in favor of the client
0 appeal requests found in favor of the agency
0 appeal requests withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

TEFRA 15 Appeals received

2 appeal requests found in favor of client
6 appeal requests found in favor of agency
5 appeal requests withdrawn
2 appeal requests abandoned by client
0 appeal requests open and pending

Quarter April – June 2020

For the **Quarter April – June 2020**, there were **13** appeal requests received in the Office of Appeals and Hearings:

Medicaid/MRT/TEFRA 2 Appeals received

0 appeal request found in favor of the client
2 appeal requests found in favor of the agency
0 appeal requests withdrawn
0 appeal request abandoned by client
0 appeal requests open and pending

Medicaid TEFRA 0 Appeals received

0 appeal requests found in favor of the client
0 appeal requests found in favor of the agency
0 appeal requests withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

TEFRA 11 Appeals received

1 appeal request found in favor of client
5 appeal requests found in favor of agency
4 appeal requests withdrawn
1 appeal request abandoned by client
0 appeal requests open and pending

Quarter July – Sept. 2020

For the **Quarter July – Sept. 2020**, there were **11** appeal requests received in the Office of Appeals and Hearings:

Medicaid/MRT/TEFRA 5 Appeals received

0 appeal requests found in favor of the client
4 appeal requests found in favor of the agency
0 appeal requests withdrawn

1 appeal request abandoned by client
0 appeal requests open and pending

Medicaid TEFRA 0 Appeals received

0 appeal requests found in favor of the client
0 appeal requests found in favor of the agency
0 appeal requests withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

TEFRA 6 Appeals received

0 appeal requests found in favor of client
3 appeal requests found in favor of agency
3 appeal requests withdrawn
0 appeal requests abandoned by client
0 appeal request open and pending

Quarter Oct. – Dec. 2020

For the **Quarter Oct. – Dec. 2020**, there were 14 appeal requests received in the Office of Appeals and Hearings

Medicaid/MRT/TEFRA 2 Appeals received

0 appeal requests found in favor of the client
1 appeal request found in favor of the agency
1 appeal request withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

Medicaid TEFRA 2 Appeals received

0 appeal requests found in favor of the client
1 appeal request found in favor of the agency
1 appeal request withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

TEFRA 10 Appeals received

3 appeal requests found in favor of client
2 appeal requests found in favor of agency
5 appeal requests withdrawn
0 appeal requests abandoned by client
0 appeal requests open and pending

VIII. Budget Neutrality Monitoring Activities

Quarter Oct. – Dec. 2020 and Demonstration Year Jan. 1 – Dec. 31, 2020

A. See **ATTACHMENT B** that depicts the following:

1. Overall TEFRA services cost by demonstration year
2. TEFRA participant months by demonstration year

3. TEFRA monthly cost per person by demonstration year
4. TEFRA cost savings by demonstration year

DHS attests and certifies that the Budget Neutrality data contained in Attachment B is accurate and correct.

- B. See **ATTACHMENT C** that depicts the monthly premium breakdown by premium class for the demonstration years

IX. Financial/Budget Neutrality/Fiscal Issues

Quarter Oct. – Dec. 2020 and Demonstration Year Jan. 1 – Dec. 31, 2020

- A. Financial issues including changes in appropriations, status of efforts to collect premiums, etc.

See **ATTACHMENT C** that depicts the monthly premium breakdown by premium class for the demonstration years. There have been no changes in the appropriation or funding status for this demonstration waiver.

- B. Anticipated fiscal problems or issues.

There are no anticipated fiscal problems to report for the quarter or for the demonstration year

- C. Status of expenditures and obligations as they relate to the budget neutrality cap.

See **ATTACHMENT B** that depicts the budget neutrality cost savings by demonstration year for the TEFRA demonstration.

DHS attests and certifies that the Budget Neutrality data contained in Attachment B is accurate and correct.

- D. Utilization by county for the current quarter.

See **ATTACHMENT D**

X. Demonstration Evaluation

Demonstration Evaluation Activities for Jan. – Dec. 2020

Arkansas Foundation for Medical Care (AFMC), a contract agent with the Division of Medical Services, performed the *TEFRA Beneficiary Satisfaction Survey*.

General Dynamics Information Technology, Inc. (GDIT), is the consulting analytic company that has provided TEFRA 1115 demonstration waiver evaluation deliverables since August 2017. GDIT will be producing the interim and summative evaluation reports for the TEFRA demonstration 05/09/18 – 12/30/22 renewal period, using results from the Beneficiary Satisfaction Survey and other data.

See **ATTACHMENT E** for a summary of GDIT activity reported by quarter and highlighted results on the four goals, evaluation hypotheses and drivers for CY2018 and CY2019 performance periods.

XI. Health Care Quality, Outcomes and Access

The following sections provide preliminary TEFRA Beneficiary Satisfaction Survey findings on the overall quality and satisfaction, access and availability of services, and the outcome of care.

Overall Quality and Satisfaction

AFMC received surveys from 537 clients before the cutoff date of Dec. 1, 2020. Of these, 533 were eligible for analysis, resulting in a final analyzable response rate of 33%. Participants were asked to rate their satisfaction with the following on a scale from 0 (“worst possible”) to 10 (“best possible”). The scores below represent an average of all responses received.

	2020	2019	2018
Health care professional	9.22	9.17	9.04
Health care	9.01	8.98	8.92
Treatment or counseling	8.41	8.11	8.19
Customer service	6.90	5.89	6.26
Application process	7.30	7.30	6.96
TEFRA program	8.43	8.22	8.04

Of the TEFRA clients who responded, the percentage below represents clients who indicated a high degree of satisfaction (a score of 8 or higher):

	2020	2019	2018
Health care professional	92.8%	91.7%	90.0%
Health care	89.8%	89.6%	88.4%
Treatment or counseling	80.6%	70.3%	75.1%
Customer service	52.2%	38.6%	40.6%
Application process	54.5%	53.3%	48.7%
TEFRA program	75.5%	72.7%	69.7%

Access and Availability of Services

Survey participants were asked how easy it was for them to get the health care and services they thought were necessary for their child.

- 98.3% of respondents reported little or no problem getting a health care professional for their child with whom they are happy.
- 98.3% of respondents reported little or no problem getting a referral for their child to see a specialist.
- 93.1% of respondents reported little or no problem getting additional specialty items for their child.
- 87.4% of respondents reported little or no problem getting any special medical equipment for their child.

This portion of the survey asked respondents about the ease of getting various types of specialized therapy, including counseling, for their child.

- 96.8% of respondents reported little or no problem getting speech therapy for their child.
- 97.2% of respondents reported little or no problem getting occupational therapy for their child.
- 98.5% of respondents reported little or no problem getting physical therapy for their child.
- 85.8% of respondents reported little or no problem getting treatment or counseling for their child.

Denied Medical Claims

The following table provides the number of denied medical claims in 2020 and the number of TEFRA beneficiaries with denied claims. The table provides the denied medical claims by service category and by denial reason. Each claim can have more than one reason for denial.

	DOCUMENTATION INADEQUATE	MEMBER HAS OTHER MEDICAL COVERAGE-BILL OTHER INSURANCE FIRST	DUPLICATE OF CLAIM PAID	DENIED ADJUSTMENT RESULTING FROM AUTOMATED ELIGIBILITY VERIFICATION & CLAIM SUBMISSION REVERSAL OF A PAID CLAIM	ADJUSTMENT VOID	PRICING ADJUSTMENT - INPATIENT PER-DIEM PRICING.	PROCESSED PER POLICY	Total
Denied Medical Claims								
HOSPITAL	1	4	12		23	13	5	40
PHARMACY				9,515				9,515
PSYCHIATRIC FACILITY - INPATIENT					3			3
Beneficiaries with Denied Medical Claims								
HOSPITAL	1	2	11		19	12	5	32
PHARMACY				1,833				1,833
PSYCHIATRIC FACILITY - INPATIENT					3			3

Outcomes of Care

The TEFRA survey includes both composite measures and rating questions. A composite measure combines the responses from two or more questions to obtain a single score. The composite measure scores represent the percentage of clients who responded favorably. For questions scaled as “never,” “sometimes,” “usually,” and “always,” a favorable response represents the proportion of clients who selected “usually” or “always.” For questions scaled as “a big problem,” “a small problem,” and “not a problem,” a favorable response represents the proportion of clients who selected “not a problem.” Rating questions are scaled from 0 to 10, where 0 represents “worst possible” and 10 represents “best possible.” The rating scores show the percentage of clients who rated the question favorably by selecting a rating of 8, 9, or 10.

The TEFRA survey includes five composite measures and six rating questions. The TEFRA composite measures include:

- **Getting care quickly:** Measures a client’s access to timely urgent and nonurgent care
- **How well doctors communicate:** Measures how well doctors listen, explain, spend enough time with, and show respect for what clients have to say
- **Customer service:** Measures how often clients got the help they needed and were treated with courtesy and respect by TEFRA’s customer service representatives
- **Special equipment and supplies:** Measures a client’s access to additional specialty items and special medical equipment
- **Special therapies:** Measures a client’s access to speech, occupational, and physical therapy

COMPOSITES/RATINGS	2020	2019	2018
Getting care quickly	92%	95%	95%
How well doctors communicate	94%	95%	93%
Customer service	76%	66%	70%
Special equipment and supplies	71%	64%	72%
Special therapies	91%	90%	90%
Rating of health care professional	93%	92%	90%
Rating of health care	90%	90%	88%
Rating of treatment or counseling	81%	70%	75%
Rating of TEFRA program	76%	73%	70%
Rating of customer service	52%	39%	41%
Rating of TEFRA application process	55%	53%	49%

Health Care Delivery System

As indicated above, TEFRA beneficiaries report high satisfaction levels with their health care providers and the quality of care they receive. TEFRA beneficiaries are served by a variety of health care providers. The following health care provider types filed at least one claim for a TEFRA beneficiary in 2020.

02 - AMBULANCE
03 - AMBULATORY SURGICAL CENTERS
04 - AUDIOLOGIST - GENERAL
05 - CHIROPRACTOR
06 - CRNA
10 - DENTAL SERVICES
11 - DENTAL SERVICES - CHS (EPSDT)
12 - DURABLE MEDICAL EQUIPMENT (DME)/OXYGEN
14 - CHS (EPSDT) - IMMUNIZATIONS
15 - CHS (EPSDT) - SCREENING
16 - EYEGLASSES
17 - FAMILY PLANNING CLINIC
19 - FAMILY PLANNING DRUGS
20 - FAMILY PLANNING PHYSICIAN
24 - HOME HEALTH SERVICES
25 - HYPERALIMENTATION
28 - INDEPENDENT LABS
29 - INDEPENDENT X-RAY
30 - INPATIENT CROSSOVERS
31 - INPATIENT HOSPITAL
33 - INPATIENT PSYCHIATRIC U21
36 - MENTAL HEALTH CLINIC - RSPMI
42 - OPHTHAMOLOGY
43 - OPHTHAMOLOGY - MEDICAL SERVICES
44 - OPTOMETRIST/OCULARIST
45 - ORAL SURGERY - PHYSICIAN CODES
46 - ORAL SURGERY - PHYSICIAN ADA CODES
47 - OTHER CARE CROSSOVERS
49 - OTHER PRACTITIONERS CROSSOVERS
50 - OUTPATIENT CROSSOVERS
51 - OUTPATIENT HOSPITAL
52 - PATHOLOGISTS
53 - PERSONAL CARE
54 - PHYSICIAN CROSSOVERS
55 - PHYSICIAN SERVICES
56 - PRESCRIPTION SERVICES
60 - VENTILATOR EQUIPMENT
66 - RADIOLOGISTS
68 - RURAL HEALTH
69 - RURAL HEALTH CROSSOVERS
70 - SURGERY
71 - CHMS/EIDT

72 - EPSDT/PODIATRY
73 - PRIVATE DUTY NURSING - EPSDT
75 - INPATIENT PEDIATRIC HOSPITAL
76 - INPATIENT PEDIATRIC HOSPITAL CROSSOVERS
78 - PEDIATRIC OUTPATIENT HOSPITAL XOVERS/MCARE-MCAID
79 - THERAPY - INDIVIDUAL/REGULAR GROUP
80 - THERAPY - SCH DIST/ED SERVICE COOP (ESC) GROUP
81 - PSYCHOLOGISTS (PHD)
82 - THERAPY - INDIVIDUAL/REGULAR GROUP CROSSOVERS
87 - INPATIENT ARKANSAS TEACHING HOSPITAL
90 - TARGETED CASE MANAGEMENT, U21-EPSDT
91 - FEDERALLY QUALIFIED HEALTH CENTERS - CORE SERVICES
92 - FEDERALLY QUAL HEALTH CTRS - CORE SERVICES, XOVERS
93 - DME-EXPANSION-EPSDT
94 - PROSTHETIC DEVICES - EPSDT
95 - ORTHOTIC APPLICANCES - EPSDT
A2 - PHYSICIAN TRANSPLANT SERVICES
AE - AUTISM-EPSDT
B1 - OUTPATIENT HOSPITAL FAMILY PLANNING
B2 - EMERGENCY HOSPITAL SERVICES
B3 - PHYSICAL THERAPY GENERAL
B4 - OCCUPATION THERAPY GENERAL
B5 - SPEECH/LANGUAGE THERAPY GENERAL
C5 - PHYSICAL THERAPY SCHOOL BASED
C6 - OCCUPATIONAL THERAPY SCHOOL BASED
C7 - SPEECH/LANGUAGE THERAPY SCHOOL BASED
C8 - AUDIOLOGIST - SCHOOL BASED
C9 - PERSONAL CARE SERVICES SCHOOL BASED
CE - CRITICAL ACCESS HOSPITALS OUTPATIENT MED
CF - CRITICAL ACCESS HOSPITALS OUTPATIENT CROSSOVERS
D3 - DEVELOPMENTAL REHABILITATION SERVICES
D7 - REHABILITATION CHMS/EIDT
E2 - PHYSICAL THERAPY CHMS/EIDT
E3 - OCCUPATIONAL THERAPY CHMS/EIDT
E4 - SPEECH/LANGUAGE THERAPY CHMS/EIDT
FH - FAMILY PLANNING ALL AID CAT, 90/10 MATCH
H1 - HOSPICE
N1 - NURSE PRACTITIONER
N2 - FAMILY PLANNING NURSE PRACTITIONER
P1 - OUTPATIENT REHABILITATION HOSPITAL
PE - PEDIATRIC OUTPATIENT HOSPITAL
T1 - TCM/CMS
T6 - SCHOOL BASED MENTAL HEALTH SERVICES
T8 - OUTPATIENT TEACHING HOSPITAL

Health care providers served TEFRA beneficiaries in nearly every county in 2020. Only Lee County in eastern Arkansas had no providers filing claims for TEFRA beneficiaries in 2020.

The following chart shows the top provider types serving TEFRA beneficiaries, as measured by the number of claims filed for services provided to TEFRA beneficiaries in 2020.

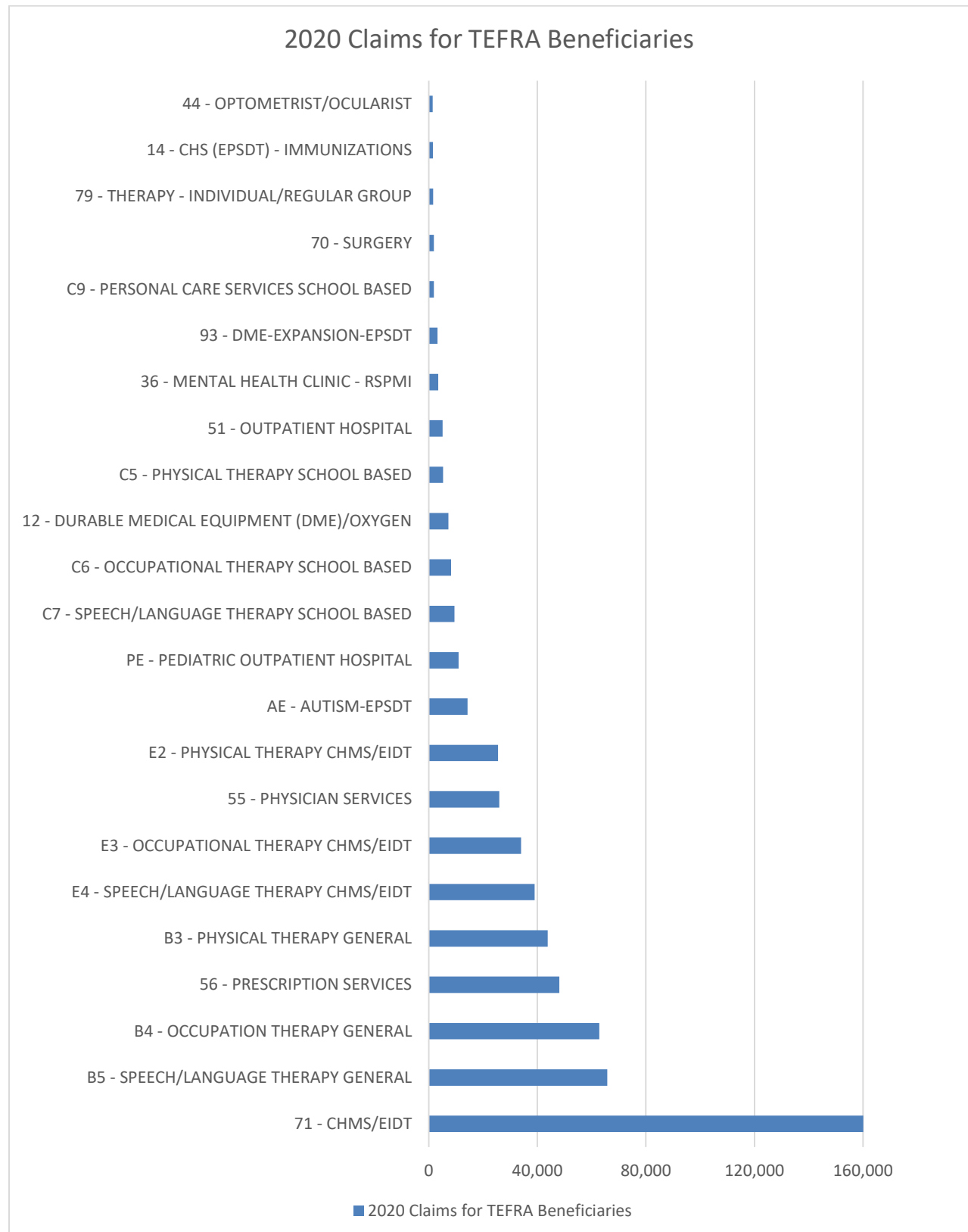


Table below gives the percentage of beneficiaries < 19 years of age who are utilizing therapy services during the measurement period by a) speech, b) occupational, and c) physical therapy services) for CY2018 and CY2019

Therapy Services (Claims-Based)	% of TEFRA-Like Beneficiaries	
	CY2018	CY2019
Speech Therapy	59.0%	59.6%
Occupational Therapy	49.2%	44.6%
Physical Therapy	64.2%	64.4%

XII. TEFRA Beneficiaries with Third Party Liability

TEFRA Beneficiaries with Third Party Liability for Quarter Oct. – Dec. 2020

Oct. – Dec. 2020 Quarter

During the **quarter Oct. – Dec. 2020**, there were **4,411** TEFRA beneficiaries with Third Party Liability (TPL)

TEFRA Beneficiaries with Third Party Liability for Demonstration Year Jan. 1 – Dec. 31, 2020

	TEFRA beneficiaries with Third Party Liability (TPL)
Jan. – March 2020 Quarter	4,146
April – June 2020 Quarter	4,188
July – Sept. 2020 Quarter	4,310
Oct. – Dec. 2020 Quarter	4,411

XIII. Enclosures/Attachments

Attachments A-1: Lists the outreach activities performed by Arkansas Foundation for Medical Care (AFMC) during the quarter

Attachments A-2: Lists the outreach activities performed by Arkansas Foundation for Medical Care (AFMC) during the demonstration year

Attachment B: TEFRA budget neutrality monitoring – Overall services costs by demonstration year

TEFRA budget neutrality monitoring – participant months by demonstration year

TEFRA budget neutrality monitoring – monthly cost per person by demonstration year

TEFRA budget neutrality monitoring – cost savings by demonstration year

Attachment C: TEFRA family income/monthly premium amount/monthly premium class breakdown by month & by demonstration year

Attachment D: Paid amount & unduplicated recipient count by recipient county

Attachment E: A summary of General Dynamics Information Technology's activity reported by quarter and highlighted results on the four goals, evaluation hypotheses and drivers for CY2018 and CY2019 performance periods.

Attachment E-4 Eligibility Procedures, Medical Service Policies, Application

XIV. State Contacts

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**Date 4th Quarter (Oct. – Dec. 2020) and Jan. 1 – Dec. 31, 2020 Annual Year End Report
Submitted to CMS**

March 31, 2021