

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas
95th General Assembly
Regular Session, 2025

As Engrossed: H4/1/25

A Bill

HOUSE BILL 1270

By: Representative Pilkington

For An Act To Be Entitled

AN ACT TO ESTABLISH A PRESCRIBED PEDIATRIC EXTENDED CARE PILOT PROGRAM THROUGH A SECTION 1115 MEDICAID DEMONSTRATION WAIVER; TO REQUIRE THE DEPARTMENT OF HUMAN SERVICES TO ADMINISTER THE PRESCRIBED PEDIATRIC EXTENDED CARE PILOT PROGRAM IN THREE COUNTIES OF THIS STATE; TO DECLARE AN EMERGENCY;

Subtitle

TO ESTABLISH A PRESCRIBED PEDIATRIC EXTENDED CARE PILOT PROGRAM THROUGH A SECTION 1115 MEDICAID DEMONSTRATION WAIVER; AND TO DECLARE AN EMERGENCY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. DO NOT CODIFY. TEMPORARY LANGUAGE. Prescribed Pediatric Extended Care Pilot Program.

(a)(1) The Department of Human Services shall establish a Prescribed Pediatric Extended Care Pilot Program to provide specialized, nonresidential medical care for children with medically complex conditions.

(2) The pilot program shall:

(A) Operate in three (3) counties, strategically selected within the most densely populated counties of the state, as determined by the department;

(B) Function under a Section 1115 Medicaid Demonstration Waiver, allowing the Arkansas Medicaid Program to cover prescribed pediatric extended care services as an alternative to home health and private duty



nursing; and

(C) Focus on the following objectives:

(i) Expand access to cost-effective, community-based pediatric extended care for children with medically complex conditions;

(ii) Reduce avoidable hospitalizations and emergency department visits for enrolled children;

(iii) Provide caregiver training and support services to families, improving long-term health outcomes; and

(iv) Assess the feasibility of a permanent statewide pediatric extended care program.

(b)(1) The department shall apply for a Section 1115 Medicaid Demonstration Waiver to secure federal approval for the pilot program within six (6) months of the effective date of this act.

(2) The waiver application shall outline:

(A) The eligibility criteria for participating children, including children who require continuous skilled nursing care or therapeutic interventions;

(B) The Medicaid reimbursement mechanisms for prescribed pediatric extended care services;

(C) Methods to evaluate cost savings and health outcomes;
and

(D) Any necessary adjustments to existing Medicaid benefits, including private duty nursing and home health services.

(c) Upon approval by the Centers for Medicare & Medicaid Services, the department shall implement the pilot program no later than January 1, 2027.

(d) To qualify for services under the pilot program, a child shall:

(1) Be under twenty-one (21) years of age;

(2) Be medically dependent or technologically dependent, as certified by a licensed physician;

(3) Require a level of care that would otherwise be provided in a hospital or skilled nursing facility; and

(4) Have a caregiver who consents to participation and engages in required training.

(e)(1) The department shall conduct an annual evaluation of the pilot program, assessing:

(A) Health outcomes of enrolled children;

(B) Cost-effectiveness compared to traditional Medicaid services; and

(C) Caregiver satisfaction and burden reduction.

(2) A comprehensive final report shall be submitted to the Governor and the General Assembly by December 31, 2030, with recommendations on whether to expand, modify, or terminate the pilot program.

(f)(1) The pilot program shall operate for a period of five (5) years unless extended by the General Assembly.

(2) If the department determines that the pilot program is not meeting its intended goals, the department may submit a request to Centers for Medicare & Medicaid Services to modify or terminate the waiver before the scheduled expiration date.

(g) The department shall adopt rules necessary to implement the pilot program, including:

(1) Licensing and operational standards for prescribed pediatric extended care facilities;

(2) Medicaid reimbursement rates and provider enrollment requirements; and

(3) Data collection protocols for evaluating the pilot program effectiveness.

(h) The department may collaborate with pediatric hospitals, home health providers, and community organizations to facilitate the pilot program's success.

SECTION 2. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that this state lacks sufficient alternative care settings for children with medically complex conditions; that due to lack of sufficient alternative care settings, children with medically complex conditions often have unnecessary hospitalizations, which results in increased expenditures to the state and in the Arkansas Medicaid Program; that unnecessary hospitalizations in children can lead to preventable harm, including infections; and that this act is immediately necessary because increasing alternative care settings for children with medically complex conditions protects the health of the children of this state. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and

safety shall become effective on:

(1) The date of its approval by the Governor;

(2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or

(3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto.

/s/Pilkington