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

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| Podiatrist 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-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-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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| Podiatrist Official Notices |
| Number | Date | Subject |
| [DMS-2009-EE-8](https://humanservices.arkansas.gov/wp-content/uploads/DMS-09-A-12.doc) | March 1, 2009 | 2009 CPT Procedure Code Conversion |
| [DMS-2008-EE-7](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-EE-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-EE-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-2.doc) | May 1, 2008 | 2008 CPT Procedure Code Conversion |
| [DMS-2008-EE-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-EE-](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-B-1.doc)4 | February 15, 2008 | Fee Schedules  |
| [DMS-2008-EE-3](https://humanservices.arkansas.gov/wp-content/uploads/DMS-08-A-3.doc) | January 31, 2008 | Reminder on Requirement for Use of Tamper-Resistant Prescription Pads Under the Medicaid Program |
| [DMS-2008-EE-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-EE-3](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-EE-2](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-EE-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-07-A-2.doc) | March 1, 2007 | 2007 Current Procedural Terminology (CPT) Procedure Code Conversion |
| [DMS-2006-EE-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-1.doc) | March 15, 2006 | 2006 CPT Procedure Code Conversion |
| [DMS-2006-EE-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-06-A-2.doc) | March 1, 2006 | 2006 HCPCS Procedure Code Conversion |
| [DMS-2004-EE-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-AR-3.doc) | November 1, 2004 | Revision of Form DMS-640 |
| [DMS-2004-EE-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-EE-1](https://humanservices.arkansas.gov/wp-content/uploads/DMS-04-AR-2.doc) | April 22, 2004 | Recoupment of Overpayment for Occupational, Physical and Speech Therapy Services |
| [DMS-2003-EE-2](https://humanservices.arkansas.gov/wp-content/uploads/DMS-03-AR-3.doc) | October 7, 2003 | Occupational, Physical, Speech Therapy Program Policy |

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| Podiatrist RA messages |
| Date | Subject |
| [04/20/17-05/04/17](https://humanservices.arkansas.gov/wp-content/uploads/170420.doc) | Professional Claims Payment for Admitted Inmate Population |
| [04/08/04-04/15/04](https://humanservices.arkansas.gov/wp-content/uploads/040408.doc) | Billing Corrections in the Podiatrist Program |