

Stricken language would be deleted from and underlined language would be added to present law.  
Act 568 of the Regular Session

State of Arkansas  
95th General Assembly  
Regular Session, 2025

As Engrossed: H2/10/25 H3/19/25

# A Bill

HOUSE BILL 1241

By: Representatives J. Mayberry, L. Johnson

By: Senator Irvin

## For An Act To Be Entitled

AN ACT TO ENSURE THAT THE ARKANSAS MEDICAID PROGRAM REIMBURSES FOR DENTAL AND ANESTHESIA COSTS FOR HIGH COMPLEXITY ORAL HEALTH CARE; AND FOR OTHER PURPOSES.

### Subtitle

TO ENSURE THAT THE ARKANSAS MEDICAID PROGRAM REIMBURSES FOR DENTAL AND ANESTHESIA COSTS FOR HIGH COMPLEXITY ORAL HEALTH CARE.

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

SECTION 1. Arkansas Code Title 20, Chapter 77, Subchapter 1, is amended to add an additional section to read as follows:

20-77-154. High complexity oral health care – Reimbursement – Definitions.

(a) As used in this section:

(1) "Healthcare provider" means:

(A) An oral maxillofacial surgeon;

(B) A dentist;

(C) A dental specialist such as a endodontist, orthodontist, periodontist, or prosthodontist;

(D) An anesthesiologist or other anesthesia provider;

(E) A pediatric dentist; or

(F) Support staff for an oral maxillofacial surgeon, dentist, specialty dentist, pediatric dentist, or anesthesiologist, or other anesthesia provider;



(2) "High complexity oral health care" means any oral health care that is complicated due to:

(A) A craniofacial condition as diagnosed by a plastic surgeon, oral and maxillofacial surgeon, otolaryngologist, or geneticist who is a member of a nationally approved cleft-craniofacial team of the American Cleft Palate-Craniofacial Association and has evaluated the patient; or

(B) An intellectual or developmental disability; and

(3) "Intellectual or developmental disability" means the same as defined in § 20-48-202.

(b)(1) The Arkansas Medicaid Program shall reimburse the dental schools who are accredited by the Commission on Dental Accreditation and academic medical centers for dental and anesthesia costs not to exceed three thousand seven hundred fifty dollars (\$3,750) per episode of care for individuals with high complexity oral health care who are eighteen (18) years of age or older and who require sedation dentistry with an annual cap per individual of five thousand dollars (\$5,000).

(2) The dental and anesthesia costs under subdivision (b)(1) of this section:

(A) Shall only be reflective of professional fees and supply costs; and

(B) Shall not include discounts or rebates received by the dental schools who are accredited by the Commission on Dental Accreditation and academic medical centers.

(3) The dental and anesthesia costs under subdivision (b)(1) of this section that exceed the annual cap of five thousand dollars (\$5,000) may be approved by the Department of Human Services through a request for an extension of benefits.

(c) The department shall apply for any federal waiver, Medicaid state plan amendment, or other authorization necessary to implement this section.

/s/J. Mayberry

APPROVED: 4/14/25