

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

State of Arkansas
89th General Assembly
Regular Session, 2013

As Engrossed: H1/30/13
A Bill

HOUSE BILL 1100

By: Representatives B. Wilkins, Baird, J. Burris, Deffenbaugh, J. Dickinson, Farrer, Gossage, Harris, Lenderman, Lowery, Magie, D. Meeks, Miller, Payton, Ratliff, Richey, T. Thompson, Wardlaw
By: Senator Bledsoe

For An Act To Be Entitled

AN ACT TO PROHIBIT HEALTH INSURANCE EXCHANGE POLICIES FROM OFFERING COVERAGE FOR ABORTIONS EXCEPT THROUGH A SEPARATE RIDER; AND FOR OTHER PURPOSES.

Subtitle

AN ACT TO PROHIBIT HEALTH INSURANCE EXCHANGE POLICIES FROM OFFERING COVERAGE FOR ABORTIONS EXCEPT THROUGH A SEPARATE RIDER.

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

SECTION 1. Arkansas Code Title 23, Chapter 79, Subchapter 1, is amended to add an additional section to read as follows:

23-79-156. Health insurance exchange – Coverage of abortions prohibited – Definitions – Findings.

(a) As used in this section:

(1) "Abortion" means the use or prescription of any instrument, medicine, drug, or any other substance or device intentionally to terminate the pregnancy of a woman known to be pregnant with an intention other than to increase the probability of a live birth, to preserve the life or health of the child after live birth, or to remove a dead unborn child who died as the result of natural causes, accidental trauma, or a criminal assault on the pregnant woman or her unborn child;

(2) "Elective abortion" means an abortion for any reason other



than:

(A)(i) To prevent the death of the mother upon whom the abortion is performed.

(ii) However, an abortion shall not be deemed an elective abortion to prevent the death of the mother based on a claim or diagnosis that without the abortion the mother will engage in conduct that will result in her death; or

(B) In a pregnancy resulting from rape or incest; and

(3) "Qualified health plan" means a health plan that meets the requirements under 42 U.S.C. § 18021, as it existed on January 1, 2013.

(b) The General Assembly finds that:

(1) Congress enacted and the president signed into law the Patient Protection and Affordable Care Act of 2010, Pub. L. No. 111-148; and

(2) In the Patient Protection and Affordable Care Act of 2010, Pub. L. No. 111-148, states are explicitly permitted to pass laws prohibiting qualified health plans offered through a health insurance exchange in their this state from offering abortion coverage.

(c)(1) In accordance with the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, a qualified health plan offered through a health insurance exchange established in this state shall not include elective abortion coverage.

(2) This section does not prevent an individual from purchasing optional supplemental coverage for elective abortions for which a separate premium shall be paid in the health insurance market outside of the state health insurance exchange as provided in subsection (d) of this section.

(d) An issuer of a health plan that offers optional supplemental abortion coverage offered in the health insurance market outside of the state health insurance exchange shall:

(1)(A) Calculate the premium for optional supplemental abortion coverage so that the premium fully covers the estimated cost of an elective abortion for an individual who enrolls for elective abortion coverage.

(B)(i) The insurer shall determine the premium required under subdivision (d)(1)(A) of this section on an average actuarial basis.

(ii)(a) In making the calculation required under subdivision (d)(1)(B)(i) of this section, the issuer shall not take into account a cost reduction in a qualified health plan offered through a health

insurance exchange established in this state estimated to result from the provision of abortion coverage that the insurer offers and that covers the individual who enrolls for elective abortion coverage.

(b) As used in subdivision (d)(1)(B)(ii)(a) of this section, cost reduction estimated to result from provision of abortion coverage includes estimated cost reduction in prenatal care, delivery, and postnatal care;

(2) Require that if an enrollee is enrolling in a health insurance plan that provides coverage other than optional supplemental abortion coverage, at the same time as the enrollee is enrolling, the enrollee shall sign at the same time three (3) separate signatures:

(A) A signature for coverage for optional supplemental abortion coverage;

(B) A signature for coverage other than for optional supplemental abortion coverage; and

(C) A signature acknowledging that the enrollee has received the cost of the separate premium; and

(3)(A) Provide at the time of enrollment a notice to enrollees that specifically states the cost of the separate premium for coverage of elective abortions.

(B) The notice required under subdivision (d)(3)(A) of this section shall be distinct and apart from the notice of the cost of the premium for the portion of the health plan that provides coverage other than optional supplemental abortion coverage.

(e) An issuer of a health plan providing coverage offered through a health insurance exchange established in this state that provides coverage other than elective abortion coverage shall not discount or reduce the premium for the coverage on the basis that an enrollee has elective abortion coverage.

(f) This section does not apply in circumstances in which federal law preempts state health insurance regulation.

/s/B. Wilkins