

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

State of Arkansas  
90th General Assembly  
Regular Session, 2015

As Engrossed: S3/19/15

# A Bill

SENATE BILL 927

By: Senator Teague

## For An Act To Be Entitled

AN ACT TO REGULATE PEDIATRIC DENTAL BENEFITS; TO CLARIFY REASONABLE ASSURANCE FOR OFF-EXCHANGE PEDIATRIC DENTAL-ESSENTIAL HEALTH BENEFITS; AND FOR OTHER PURPOSES.

### Subtitle

TO REGULATE PEDIATRIC DENTAL BENEFITS;  
AND TO CLARIFY REASONABLE ASSURANCE FOR  
OFF-EXCHANGE PEDIATRIC DENTAL-ESSENTIAL  
HEALTH BENEFITS.

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

*SECTION 1. Arkansas Code Title 23, Chapter 99, Subchapter 4, is amended to add an additional section to read as follows:*

*23-99-421. Pediatric dental benefits.*

*(a) As used in this section:*

*(1) "Exchange" means a health benefit exchange that offers health benefits under a health benefit plan offered by a healthcare insurer in this state through a state-based health insurance exchange or a health insurance exchange operated by the federal government under the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, and the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152;*

*(2) "Qualified dental plan" means a limited scope dental plan that has a certification that the qualified dental plan meets the criteria for certification under 42 U.S.C. § 18031(d)(2)(B)(ii), in effect on January 1, 2015; and*



(3) "Qualified health plan" means a health benefit plan that provides healthcare coverage of essential health benefits under 42 U.S.C. § 18021(a), in effect on January 1, 2015.

(b) Beginning January 1, 2016, a qualified health plan offering healthcare coverage under the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, and the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152, satisfies the minimum essential pediatric oral health benefits under the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, and the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152, for health benefit plans offered through an exchange or outside an exchange that do not include the minimum essential pediatric oral health benefits if the healthcare insurer has reasonable assurance that the minimum essential pediatric oral health benefits are otherwise provided to the purchaser of the health benefit plan.

(c) The healthcare insurer shall be considered to have reasonable assurance that the minimum essential pediatric oral health benefits are otherwise provided to the purchaser of the health benefit plan if:

(1) At least one (1) qualified dental plan offers the minimum essential pediatric oral health benefits that are available to the purchaser of the health benefit plan; and

(2) A qualified health plan prominently discloses at the time of purchase on a form approved by the Insurance Commissioner that the qualified health plan does not provide the minimum essential pediatric oral health benefits.

/s/Teague