

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

State of Arkansas
94th General Assembly
Regular Session, 2023

As Engrossed: H2/22/23
A Bill

HOUSE BILL 1034

By: Representative Pilkington

For An Act To Be Entitled

AN ACT TO REGULATE THE REIMBURSEMENT RATE OF A BIRTH UNDER AN INSURANCE POLICY IN THIS STATE; TO ESTABLISH THE REIMBURSEMENT RATE FOR A BIRTH TO BE AT LEAST THE SAME AS THE REIMBURSEMENT RATE FOR A BIRTH BY CESAREAN SECTION; AND FOR OTHER PURPOSES.

Subtitle

TO REGULATE THE REIMBURSEMENT RATE OF A BIRTH UNDER AN INSURANCE POLICY IN THIS STATE; AND TO ESTABLISH THE REIMBURSEMENT RATE FOR A BIRTH TO BE AT LEAST THE SAME AS THE REIMBURSEMENT RATE FOR A BIRTH BY CESAREAN SECTION.

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:

23-79-168. Reimbursement rate for births – Legislative findings – Definitions.

(a) The General Assembly finds that:

(1) Approximately ten thousand (10,000) babies are born per day in the United States;

(2) Of those ten thousand (10,000) babies, approximately one-third (1/3) of the births are delivered by Cesarean section instead of vaginal delivery;

(3) Healthcare professionals are generally paid more for a birth



by Cesarean section than for a vaginal birth; and

(4) The reimbursement rate for a birth in this state needs to be equitable and no less than the established reimbursement rate of a birth by Cesarean section under a health benefit plan.

(b) As used in this section:

(1) "Birth" means delivery of a newborn child either by vaginal delivery or Cesarean section;

(2)(A) "Health benefit plan" means an individual, blanket, or group plan or a policy or contract for healthcare services issued or delivered by a healthcare insurer.

(B) "Health benefit plan" includes:

(i) Indemnity and managed care plans; and

(ii) Nonfederal governmental plans as defined in 29 U.S.C. § 1002(32), as it existed on January 1, 2024.

(C) "Health benefit plan" does not include:

(i) A disability income plan;

(ii) A credit insurance plan;

(iii) Insurance coverage issued as a supplement to liability insurance;

(iv) A medical payment under automobile or homeowner's insurance plans;

(v) A health benefit plan provided under Arkansas Constitution, Article 5, § 32, the Workers' Compensation Law, § 11-9-101 et seq., or the Public Employee Workers' Compensation Act, § 21-5-601 et seq.;

(vi) A plan that provides only indemnity for hospital confinement;

(vii) An accident-only plan;

(viii) A specified disease plan;

(ix) A long-term-care-only plan;

(x) A dental-only plan; or

(xi) A vision-only plan;

(3) "Healthcare insurer" means an entity subject to the insurance laws of this state or the jurisdiction of the Insurance Commissioner that contracts or offers to contract to provide health insurance coverage, including without limitation an insurance company, a health

maintenance organization, a hospital medical service corporation, a self-insured governmental or church plan in this state;

(4) "Healthcare professional" means a person who is licensed, certified, or otherwise authorized by the laws of this state to administer health care in the ordinary course of the practice of his or her profession; and

(5) "Reimbursement rate" means the amount paid to a healthcare professional by a healthcare insurer for certain procedures based on Current Procedural Terminology codes or the Healthcare Common Procedure Coding System codes and the costs of healthcare services.

(c) A healthcare insurer shall use the reimbursement rate for a birth by Cesarean section to reimburse a healthcare professional for a birth in this state.

/s/Pilkington