

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

State of Arkansas
95th General Assembly
Regular Session, 2025

As Engrossed: H3/19/25

A Bill

HOUSE BILL 1142

By: Representative A. Brown

By: Senator J. Dotson

For An Act To Be Entitled

AN ACT TO CREATE THE REPRODUCTIVE EMPOWERMENT AND
SUPPORT THROUGH OPTIMAL RESTORATION (RESTORE) ACT;
AND FOR OTHER PURPOSES.

Subtitle

TO CREATE THE REPRODUCTIVE EMPOWERMENT
AND SUPPORT THROUGH OPTIMAL RESTORATION
(RESTORE) ACT.

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

SECTION 1. DO NOT CODIFY. Title.

This act shall be known and may be cited as the "Reproductive
Empowerment and Support Through Optimal Restoration (RESTORE) Act".

SECTION 2. Arkansas Code Title 20, Chapter 16, is amended to add an
additional subchapter to read as follows:

Subchapter 26 – Reproductive Empowerment and Support Through Optimal
Restoration Act

20-16-2601. Title.

This subchapter shall be known and may be cited as the "Reproductive
Empowerment and Support Through Optimal Restoration Act".

20-16-2602. Legislative findings.

The General Assembly finds that:

(1) There is a growing interest among women to proactively



assess their overall health and understand how factors such as age and medical history contribute to reproductive health and fertility;

(2)(A) Women are worthy of the highest standard of medical care, including the opportunity to assess, understand, and improve their reproductive health.

(B) Unfortunately, many women do not receive adequate information about their reproductive health and do not have access to restorative reproductive medicine;

(3) Reproductive health conditions are the leading causes of infertility, which affects fifteen to sixteen percent (15-16%) of couples in the United States;

(4) Research shows four (4) or more conditions or factors are the cause of most female infertility;

(5) There is a gap in research and care for female reproductive health conditions, which affects many Americans struggling with unexplained infertility;

(6) Restorative reproductive medicine aims to diagnose and treat underlying hormonal and other imbalances, restore health when possible, and improve women's health functioning and long-term outcomes;

(7) Restorative reproductive medicine can eliminate barriers to successful conception, pregnancy, and birth as well as address some causes of recurrent miscarriages; and

(8) Restorative reproductive medicine often alleviates some difficult symptoms associated with reproductive health conditions, including hormonal acne, hormonal weight gain, hormonal mood changes and depression, painful menstruation, painful flare-ups, bloating, inflammation, heavy menstruation, irregular menstruation, nerve pain, bowel symptoms, pain during sexual intercourse, and back pain.

20-16-2603. Definitions.

As used in this subchapter:

(1) "Assisted reproductive technology" means a treatment or procedure involving the handling of a human egg, sperm, or embryo outside of the body with the intent of facilitating a pregnancy, including:

(A) Artificial insemination;

(B) Intrauterine insemination;

- (C) In vitro fertilization;
- (D) Gamete intrafallopian fertilization;
- (E) Zygote intrafallopian fertilization;
- (F) Egg, embryo, or sperm cryopreservation; and
- (G) Egg, sperm, or embryo donation;

(2)(A) "Fertility awareness-based methods" means modern, evidence-based methods of tracking the menstrual cycle through observable biological signs in a woman, such as body temperature, cervical fluid, or hormone production in the reproductive system, including luteinizing hormone and estrogen.

(B) "Fertility awareness-based methods" includes without limitation:

- (i) Fertility education and medical management;
- (ii) The symptothermal method;
- (iii) The Creighton Model FertilityCare System; and
- (iv) The Billings Ovulation Method;

(3) "Fertility education and medical management" means the program developed in collaboration with the Reproductive Health Research Institute for medical research, protocols, and medical training for healthcare professionals in order to enable the clinical application of research advances in reproductive endocrinology, by providing education for women about their bodies and hormonal health and medical support, as appropriate;

(4) "Infertility" means a symptom of an underlying disease or condition within a person's body that makes successfully conceiving and carrying a child to term difficult or impossible, which is diagnosed after:

(A) Twelve (12) months of sexual intercourse without the use of a chemical, barrier, or other contraceptive method for women under thirty-five (35) years of age; or

(B) Six (6) months of targeted sexual intercourse without the use of a chemical, barrier, or other contraceptive method for women who are thirty-five (35) years of age and older, when conception should otherwise be possible;

(5) "Natural procreative technology" means an approach to health care that monitors and maintains a woman's reproductive and gynecological health, including laparoscopic gynecologic surgery to reconstruct the uterus,

fallopian tubes, ovaries, or other organ structures to eliminate endometriosis and other reproductive health conditions;

(6) "Reproductive health condition" means a health condition that makes successfully conceiving a child difficult to impossible when conception should otherwise be possible, including without limitation:

- (A) Endometriosis;
- (B) Adenomyosis;
- (C) Polycystic ovary syndrome;
- (D) Uterine fibroids;
- (E) Blocked fallopian tubes;
- (F) Hormonal imbalances;
- (G) Hyperprolactinemia;
- (H) Thyroid conditions; and
- (I) Ovulation dysfunctions;

(7) "Restorative reproductive health" means a scientific approach to reproductive medicine that seeks to cooperate with or restore the normal physiology and anatomy of the human reproductive system, including without limitation:

- (A) Body literacy programs that incorporate science-based charting methods;
- (B) Teacher-led reproductive health education;
- (C) Restorative reproductive medicine;
- (D) Natural procreative technology;
- (E) Fertility awareness-based methods; and
- (F) Fertility education and medical management; and

(8)(A) "Restorative reproductive medicine" means a scientific approach to reproductive medicine that seeks to cooperate with or restore the normal physiology and anatomy of the human reproductive system without the use of methods that are inherently suppressive, circumventive, or destructive to natural human functions.

(B) "Restorative reproductive medicine" includes:

- (i) Ultrasounds;
- (ii) Blood tests;
- (iii) Hormone panels;
- (iv) Laparoscopic and exploratory surgeries;
- (v) Examinations of a patient's overall health and

lifestyle;

(vi) Elimination of environmental endocrine disruptors;

(vii) Assessment of the health and fertility of a patient's partner;

(viii) Natural procreative technology;

(ix) Fertility awareness-based methods; and

(x) Fertility education and medical management.

20-16-2604. Assisted reproductive technology – Discrimination against nonparticipating healthcare providers prohibited.

Notwithstanding any other state law, a person or entity that receives state financial assistance or local government assistance shall not penalize, retaliate against, or otherwise discriminate against a healthcare provider on the basis that the healthcare provider does not or declines to:

(1) Assist in, receive training in, provide, perform, refer for, pay for, or otherwise participate in assisted reproductive technology; or

(2) Facilitate or make arrangements for any of the activities under subdivision (1) of this section in a manner that violates the healthcare provider's sincerely held religious beliefs or moral convictions.

20-16-2605. Fertility awareness-based methods – Incorporation into Title X programs.

(a) All Title X-funded facilities in Arkansas shall include fertility awareness-based methods as part of covered family planning and reproductive health services.

(b)(1) The Department of Health shall work with Title X-funded facilities to integrate fertility awareness-based methods into existing programs within twelve (12) months of the effective date of this section.

(2) The department shall provide guidance and support to facilities in implementing the fertility awareness-based methods, including:

(A) Training for healthcare providers on fertility awareness-based methods; and

(B) Development of patient education materials on fertility awareness-based methods.

(c) Title X-funded facilities shall allocate a portion of existing Title X funds to cover implementing and providing fertility awareness-based

methods.

20-16-2606. Advancing education on reproductive health conditions.

(a) As authorized by state or federal funding, the Department of Health shall integrate information about fertility awareness-based methods into existing public health programs, including:

- (1) Family planning services;
- (2) Maternal and child health programs; and
- (3) Women's health initiatives.

(b) Existing health education materials and resources shall be updated to include information on restorative reproductive medicine.

SECTION 3. Arkansas Code § 23-85-137 is amended to read as follows:

23-85-137. In vitro fertilization coverage required – Definitions.

(a) As used in this section:

(1)(A) "Fertility awareness-based methods" means modern, evidence-based methods of tracking the menstrual cycle of a woman through observable biological signs, including without limitation:

- (i) Body temperature;
- (ii) Cervical fluid; or
- (iii) Hormone production in the reproductive system, including luteinizing hormone and estrogen.

(B) "Fertility awareness-based methods" includes without limitation:

- (i) Fertility education and medical management;
- (ii) The symptothermal method;
- (iii) The Creighton Model FertilityCare System; or
- (iv) Billings Ovulation Method;

(2) "Fertility education and medical management" means a program developed in collaboration with the Reproductive Health Research Institute for medical research, protocols, and medical training for healthcare professionals in order to enable the clinical application of research advances in reproductive endocrinology by providing education for a woman about her body and hormonal health and medical support, as appropriate;

(3) "Natural procreative technology" means an approach to healthcare services that monitors and maintains a woman's reproductive and

gynecological health, including without limitation laparoscopic gynecologic surgery to reconstruct the uterus, fallopian tubes, ovaries, and other organ structures, to eliminate endometriosis and other reproductive health conditions; and

(4)(A) "Restorative reproductive medicine" means any scientific approach to reproductive medicine that seeks to cooperate with or restore the normal physiology and anatomy of the human reproductive system without the use of methods that are suppressive, circumventive, or destructive to natural human functions.

(B) "Restorative reproductive medicine" includes without limitation:

(i) An ultrasound;

(ii) A blood test;

(iii) A hormone panel test;

(iv) A Laparoscopic or exploratory surgery;

(v) An examination of a patient's overall health and lifestyle;

(vi) Eliminating environmental endocrine disruptors;

(vii) Assessing the health and fertility of a patient's partner;

(viii) Natural procreative technology;

(ix) Fertility awareness-based methods; or

(x) Fertility education and medical management.

(b) All ~~An~~ accident and health insurance ~~companies~~ company doing business in this state shall include, as a covered expense, in vitro fertilization and restorative reproductive medicine.

~~(b)(c)~~ Pursuant to the applicable provisions of Under the Arkansas Insurance Code, the Insurance Commissioner may suspend or revoke the certificate of authority of any insurance company failing to comply with ~~the provisions of~~ this section.

~~(e)(d)~~ After conducting appropriate studies and public hearings, the commissioner shall establish minimum and maximum levels of coverage to be provided by ~~the~~ an accident and health insurance ~~companies~~ company.

~~(d)(e)~~ Coverage required under this section shall include services and procedures performed at a medical facility licensed or certified by the Department of Health or another state health department that conform to the

guidelines and minimum standards of the:

(1) American College of Obstetricians and Gynecologists for in vitro fertilization clinics; ~~or~~

(2) American Society for Reproductive Medicine for programs of in vitro fertilization; or

(3) Institute of Restorative Reproductive Medicine of America for programs of restorative reproductive medicine.

~~(e)~~(f) Continued certification shall require that the facility is achieving a reasonable success rate with ~~both~~ fertilization, fertility, and births.

~~(f)~~(g) Appropriate laboratory facilities ~~must~~ shall be provided by the entity requesting certification.

SECTION 4. Arkansas Code § 23-86-118 is amended to read as follows:

23-86-118. In vitro fertilization coverage required - Definitions.

(a) As used in this section:

(1)(A) "Fertility awareness-based methods" means modern, evidence-based methods of tracking the menstrual cycle of a woman through observable biological signs, including without limitation:

(i) Body temperature;

(ii) Cervical fluid; or

(iii) Hormone production in the reproductive system, including luteinizing hormone and estrogen.

(B) "Fertility awareness-based methods" includes without limitation:

(i) Fertility education and medical management;

(ii) The symptothermal method;

(iii) The Creighton Model FertilityCare System; or

(iv) The Billings Ovulation Method;

(2) "Fertility education and medical management" means a program developed in collaboration with the Reproductive Health Research Institute for medical research, protocols, and medical training for healthcare professionals in order to enable the clinical application of research advances in reproductive endocrinology by providing education for a woman about her body and hormonal health and medical support, as appropriate;

(3) "Natural procreative technology" means an approach to

healthcare services that monitors and maintains a woman's reproductive and gynecological health, including without limitation laparoscopic gynecologic surgery to reconstruct the uterus, fallopian tubes, ovaries, and other organ structures, to eliminate endometriosis and other reproductive health conditions; and

(4)(A) "Restorative reproductive medicine" means any scientific approach to reproductive medicine that seeks to cooperate with or restore the normal physiology and anatomy of the human reproductive system without the use of methods that are suppressive, circumventive, or destructive to natural human functions.

(B) "Restorative reproductive medicine" includes without limitation:

(i) An ultrasound;

(ii) A blood test;

(iii) A hormone panel test;

(iv) A Laparoscopic or exploratory surgery;

(v) An examination of a patient's overall health and

lifestyle;

(vi) Eliminating environmental endocrine disruptors;

(vii) Assessing the health and fertility of a

patient's partner;

(viii) Natural procreative technology;

(ix) Fertility awareness-based methods; or

(x) Fertility education and medical management.

(b) All ~~An~~ accident and health insurance ~~companies~~ company doing business in this state shall include, as a covered expense, in vitro fertilization and restorative reproductive medicine.

~~(b)(c)~~ Pursuant to the applicable provisions of Under the Arkansas Insurance Code, the Insurance Commissioner may suspend or revoke the certificate of authority of any insurance company failing to comply with ~~the provisions of~~ this section.

~~(e)(d)~~ After conducting appropriate studies and public hearings, the commissioner shall establish minimum and maximum levels of coverage to be provided by ~~the~~ an accident and health insurance ~~companies~~ company.

~~(d)(e)~~ Coverage required under this section shall include services performed at:

(1) a A medical facility licensed or certified by the Department of Health;;

(2) those performed at a A facility certified by the department that conforms to the American College of Obstetricians and Gynecologists guidelines for in vitro fertilization clinics, or;

(3) those performed at a A facility certified by the department that meets the American Society for Reproductive Medicine minimal standards for programs of in vitro fertilization; or

(4) A facility certified by the department that meets the guidelines and standards of the Institute of Restorative Reproductive Medicine of America for programs of restorative reproductive medicine.

/s/A. Brown