

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: H4/2/25

## A Bill

HOUSE BILL 1664

By: Representative K. Brown

### For An Act To Be Entitled

AN ACT TO AMEND "QUINCY'S LAW" CONCERNING PHYSICAL EXAMS AND OTHER TESTING IN AN INVESTIGATION INVOLVING ALLEGED ABUSE UNDER THE CHILD MALTREATMENT ACT; TO PROVIDE FOR THE RIGHT OF A PARENT, GUARDIAN, OR CUSTODIAN TO BE PROVIDED WITH THE MEDICAL RECORDS OF A CHILD WHO HAS BEEN REMOVED FROM THE CUSTODY OF THE PARENT, PUTATIVE PARENT, GUARDIAN, OR CUSTODIAN OR IS IN THE CUSTODY OF THE DEPARTMENT OF HUMAN SERVICES; TO DECLARE AN EMERGENCY; AND FOR OTHER PURPOSES.

### Subtitle

TO AMEND "QUINCY'S LAW" CONCERNING PHYSICAL EXAMS AND OTHER TESTING IN AN INVESTIGATION INVOLVING ALLEGED ABUSE UNDER THE CHILD MALTREATMENT ACT; AND TO DECLARE AN EMERGENCY.

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

*SECTION 1. DO NOT CODIFY. Legislative findings and intent.*

*(a) The General Assembly finds that:*

*(1) Child maltreatment investigations have at times led to the wrongful or mistaken allegation of child maltreatment against a parent or other caretaker when the child's symptoms that may, at first or superficial glance, appear to be manifestations of abuse or neglect, are actually the result of a medical condition that may or may not be known to the child's family, including genetic conditions that the parent himself or herself may*



unknowingly have;

(2) When such a child maltreatment investigation results in a child being removed from his or her home and placed in foster care, it may result in varying levels of trauma to the child, his or her siblings, his or her parent or parents, and other members of the child's family;

(3) A parent or other caretaker of a child who is wrongfully or mistakenly alleged to have caused or contributed to the abuse or neglect of a child who is actually presenting symptoms of a medical condition that are not caused by abuse or neglect to the child may be subjected to not only separation from his or her child, but also threats to his or her liberty in the form of having a petition for dependency-neglect or a petition for termination of parental rights filed against him or her, or even having his or her name placed on the Child Maltreatment Central Registry or a criminal prosecution against him or her when there was not in fact child maltreatment or a criminal offense committed;

(4) These detrimental effects can cause loss of time, money, and mental and emotional wellbeing to many persons affected by the wrongful or mistaken allegation of child maltreatment; and

(5) Although the intent of the Child Maltreatment Act, § 12-18-101 et seq., is to protect children from maltreatment, wrongful or mistaken allegations of child maltreatment for symptoms of a medical condition may actually contribute to the child's suffering not only in the form of trauma, but also in that, if a child's underlying medical condition is overlooked or ignored, the child remains untreated for that medical condition and the parent or caretaker deprived of otherwise discovering and being able to provide for the proper medical care of his or her child.

(b) It is the intent of the General Assembly for this act to contribute not only to the protection of a wrongfully or mistakenly accused parent, but also the protection of the child, the family unit, and the overall integrity of the state's child welfare, hospital, and legal systems.

SECTION 2. Arkansas Code § 12-18-614 is amended to read as follows:

12-18-614. Submission to a physical exam or other testing.

(a) An investigation under this chapter may include a physical examination, a drug test, radiology procedures, photographs, and a psychological or psychiatric examination of all children subject to the care,

custody, or control of the alleged offender.

(b)(1) If the report of child maltreatment or suspected child maltreatment alleges abuse as defined in ~~§12-18-103~~ § 12-18-103(3), the alleged offender may:

(A)(i) For the purpose of obtaining a second opinion, request that the alleged victim be examined by a licensed healthcare provider of the alleged offender's choosing who:

(a) Did not perform the initial examination, test, or procedure described under subsection (a) of this section; and

(b) Routinely provides medical care to pediatric patients.

(ii) An examination performed under subdivision (b)(1)(A)(i) of this section ~~shall~~:

(a) Shall be paid for by the alleged offender or as otherwise covered by insurance ~~or Medicaid~~; and

(b) May be requested by the alleged offender regardless of whether the alleged victim has been taken into or placed in the custody of the Department of Human Services; and

(B)(i) For the purpose of ruling out a possible differential diagnosis, request that a licensed healthcare provider who routinely provides medical care to pediatric patients examine the alleged victim to determine ~~whether or not~~ if the alleged victim has ~~one (1) or more of the following medical conditions~~ a congenital cutaneous variant, bone fragility, a coagulation disorder, capillary fragility associated with a genetic disorder or that may be caused by a defect in the collagen elastin matrix, hyperextensible skin, multiple broken bones in various stages of healing and including without limitation classic metaphyseal lesions, blue or grey sclera, impaired bone mineralization, or another medical condition that may appear to be caused by suspected abuse or increase the risk of misdiagnosis of abuse as defined in § 12-18-103(3), including without limitation:

(a) Marfan's syndrome;

(b) Hypermobility spectrum disorders;

~~(a)(c)~~ Rickets;

~~(b)(d)~~ Ehlers-Danlos syndrome;

~~(e)(e)~~ Osteogenesis imperfecta;

- ~~(d)(f)~~ Vitamin D deficiency; or
- ~~(e)(g)~~ Another medical condition that may:

Vitamin K deficiency

- ~~(1) Appear to be caused by suspected abuse as defined in § 12-18-103; or~~
- ~~(2) Increase the risk of a misdiagnosis of abuse as defined in § 12-18-103.~~

(ii) An examination performed under subdivision (b)(1)(B)(i) of this section shall be paid for by the alleged offender or as otherwise covered by insurance ~~or Medicaid~~.

(iii) If the alleged victim undergoes genetic testing under subdivision (b)(1)(B)(i) of this section, the genetic testing shall include a complete family medical history even if the alleged victim's family members have not been diagnosed with a genetic condition, which shall include the licensed healthcare provider who routinely provides medical care to pediatric patients ascertaining if there is a family medical history of:

- (a) Joint hypermobility;
- (b) Sprains;
- (c) Bruising;
- (d) Connective tissue disorder or the physical manifestations of a connective tissue disorder; or
- (e) Fractures, including without limitation the cause of each fracture and the age of the family member at the time of the fracture.

(2) A licensed healthcare provider examination under subdivision (b)(1) of this section shall not be requested for the purpose of obtaining a second opinion ~~or to determine whether or not~~ if an alleged victim has been a victim of: ~~sexual~~

- (A) Sexual abuse; or
- (B) Physical abuse when the alleged victim is:
  - (i) In a critical medical condition; or
  - (ii) Receiving life-sustaining medical treatment.

SECTION 3. Arkansas Code Title 12, Chapter 18, Subchapter 6, is amended to add an additional section to read as follows:

12-18-624. Right of parent, guardian, or custodian to medical records

of child – Definitions.

(a)(1) A court with jurisdiction may order a healthcare institution or practitioner to provide an alleged child victim's medical records to an alleged offender if the alleged offender:

(A) Has been accused of physical abuse; and

(B) Is a parent, putative parent, guardian, or custodian of the alleged victim.

(2) A court with jurisdiction may enter a protective order restricting the dissemination of the medical records or from making any use of the medical records other than for purposes of a specific case before the court.

(3) Medical records shall include hospital or clinic records, physicians' records, or other healthcare records, including without limitation:

(A) An admissions form, discharge summary, history and physical exam records, progress notes, physicians' orders, reports of operations, recovery room records, lab reports, consultation reports, medication administration records, nurses' notes, and other reports catalogued and maintained by the medical records department of a hospital, doctor's office, medical clinic, or any other medical facility; and

(B) A paper entry, electronic entry, or image that is:

(i) Captured in relation to a diagnosis, treatment, or other service provided to a child; or

(ii) Relied upon by a healthcare provider to diagnose or provide treatment or other services to a child.

(4) A healthcare institution or provider shall redact the alleged child victim's address, phone number, email address, and other information regarding the alleged child victim's foster placement before providing medical records under this section.

(5) A healthcare institution or provider that fails to provide medical records under this section pursuant to a valid court order may be held in contempt of court under § 16-10-108.

SECTION 4. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that "Quincy's Law", Acts 2021, No. 976, is a crucial protection for persons who are the subject of an

investigation under the Child Maltreatment Act, § 12-18-101 et seq.; that since the enactment of Quincy's Law in 2021, an additional need for further protections under Quincy's Law has been demonstrated, most notably to provide further clarity in child maltreatment investigations involving differential diagnoses that may present as possible child abuse without additional testing that the provisions in this act make available; that this act is needed not only to protect wrongfully accused parents, but also to assist a parent who may not be aware of his or her child's condition and be given the opportunity to provide his or her child necessary medical treatment; that this act is also urgent to protect families from undergoing unnecessary trauma related to family separation and wrongful or mistaken allegations of child maltreatment that are actually manifestations of medical conditions; and that numerous child maltreatment investigations are taking place at any given time, and thus there is an urgent need for the provisions in this act to become effective. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on:

(1) The date of its approval by the Governor;

(2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or

(3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto.

/s/K. Brown