

Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

1 State of Arkansas
2 84th General Assembly
3 Regular Session, 2003
4

As Engrossed: S3/21/03

A Bill

SENATE BILL 677

5 By: Senator Malone
6 By: Representative Roebuck
7

For An Act To Be Entitled

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9
10 AN ACT TO ENSURE THAT HEALTH BENEFIT PLANS
11 PROVIDE COVERAGE FOR ANESTHESIA AND HOSPITAL
12 CHARGES IN CASES INVOLVING YOUNG CHILDREN AND
13 PERSONS WITH SERIOUS MENTAL OR PHYSICAL
14 CONDITIONS WHERE THE AGE OR CONDITION REQUIRES
15 HOSPITALIZATION OR GENERAL ANESTHESIA IN ORDER TO
16 SAFELY AND EFFECTIVELY PERFORM DENTAL PROCEDURES
17 ON THE PATIENT; AND FOR OTHER PURPOSES.
18

Subtitle

19
20 AN ACT TO ENSURE THAT HEALTH BENEFIT
21 PLANS PROVIDE COVERAGE FOR ANESTHESIA
22 AND HOSPITAL CHARGES FOR DENTAL
23 PROCEDURES.
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26 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
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28 SECTION 1. Arkansas code Title 23, Chapter 86, Subchapter 1 is amended
29 to add an additional section to read as follows:

30 23-86-121. Coverage for anesthesia and hospitalization for dental
31 procedures.

32 (a) Health benefit plans shall provide coverage for payment of
33 anesthesia and hospital or ambulatory surgical facility charges for services
34 performed in connection with dental procedures in a hospital or ambulatory
35 surgical facility, if the provider treating the patient certifies that,
36 because of the patient's age or condition or problem, hospitalization or



1 general anesthesia is required in order to safely and effectively perform the
2 procedures and the patient is:

3 (1) A child under the age of seven (7) years who is determined
4 by two (2) dentists licensed under § 17-82-101 et seq., to require, without
5 delay, necessary dental treatment in a hospital or ambulatory surgical center
6 that is due to a significantly complex dental condition;

7 (2) A person with a diagnosed serious mental or physical
8 condition; or

9 (3) A person with a significant behavioral problem as determined
10 by the covered person's physician as licensed under § 17-95-101.

11 (b) The health benefit plan may apply deductibles, coinsurance,
12 network requirements, medical necessity determinations, and other limitations
13 as are applied to other covered services.

14 (c) The health benefit plan may require prior authorization for
15 hospitalization for dental care procedures in the same manner that prior
16 authorization is required for hospitalization for other covered medical
17 conditions.

18 (d) This section shall not apply to treatment rendered for
19 temporomandibular joint disorders.

20 (e)(1) This section applies to health benefit plans that are issued,
21 renewed, extended, or modified on and after January 1, 2004.

22 (2) "Renewed, extended or modified" shall include a change in
23 premium or other financial term.

24 (f) "Health benefit plan" means any policy, contract, or agreement
25 offered by an insurance company, health maintenance organization, or hospital
26 and medical service corporation to provide, reimburse, or pay for health care
27 services, but does not include the following:

28 (1) Workers' compensation coverage; or

29 (2) Self-funded or self-insured health plans, unless the plan is
30 established or maintained for employees of a governmental or church entity.

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32 /s/ Malone
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