Stricken language would be deleted from and underlined language would be added to present law. Act 1226 of the Regular Session

1	State of Arkansas As Engrossed: H3/25/13 H3/26/13 H4/4/13 89th General Assembly As Bill
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3	Regular Session, 2013HOUSE BILL 2121
4 5	By: Representatives Hawthorne, E. Armstrong, Baltz, Ferguson, Kizzia, Scott
6	By: Representatives flawmonie, E. Affistiong, Banz, Perguson, Kizzia, Scott
7	For An Act To Be Entitled
, 8	AN ACT TO REQUIRE HEALTH BENEFITS PLANS TO PROVIDE
9	FOR CORRECTIVE SURGERY AND TREATMENT FOR CRANIOFACIAL
10	ANOMALY; AND FOR OTHER PURPOSES.
11	
12	
13	Subtitle
14	TO REQUIRE HEALTH BENEFIT PLANS TO
15	PROVIDE FOR CORRECTIVE SURGERY AND
16	TREATMENT FOR CRANIOFACIAL ANOMALY.
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19	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
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21	SECTION 1. Arkansas Code Title 23, Chapter 79, is amended to add an
22	additional subchapter to read as follows:
23	<u> Subchapter 15 — Coverage for Craniofacial Anomaly Corrective Surgery</u>
24	<u>23-79-1501. Definitions.</u>
25	As used in this subchapter:
26	(1) "Corrective surgery" means the use of surgery to alter the
27	form and function of the cranial facial tissues due to a congenital or
28	acquired musculoskeletal disorder;
29	(2) "Craniofacial anomaly" means a congenital or acquired
30	musculoskeletal disorder that primarily affects the cranial facial tissue;
31	and
32	(3)(A) "Health benefit plan" means an individual, blanket, or
33	group plan, policy, or contract for health care services issued or delivered
34 25	by a health care insurer, health maintenance organization, hospital medical
35	service corporation, or self-insured governmental or church plan in this
36	<u>state.</u>



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1	(B) "Health benefit plan" includes:
2	(i) Indemnity and managed care plans; and
3	(ii) Governmental plans as defined in 29 U.S.C. §
4	1002(32), as it existed on January 1, 2013, except governmental self-financed
5	insurance organizations.
6	(C) "Health benefit plan" does not include:
7	(i) Disability income plans;
8	(ii) Credit insurance plans;
9	(iii) Insurance coverage issued as a supplement to
10	liability insurance;
11	(vi) Medical payments under automobile or
12	homeowners' insurance plans;
13	(v) Health benefit plans provided under Arkansas
14	Constitution, Article 5, § 32, the Workers' Compensation Law, § 11-9-101 et
15	seq., and the Public Employee Workers' Compensation Act, § 21-5-601 et seq.;
16	(vi) Plans that provide only indemnity for hospital
17	<u>confinement;</u>
18	(vii) Accident only plans; or
19	(viii) Specified disease plans.
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21	<u>23-79-1502. Craniofacial anomaly — Coverage for corrective surgery</u>
22	required.
23	(a)(1) A health benefit plan that is offered, issued, or renewed in
24	this state shall include coverage for corrective surgery and related medical
25	<u>care for a person of any age who is diagnosed as having a craniofacial</u>
26	anomaly if the surgery and treatment are medically necessary to improve a
27	functional impairment that results from the craniofacial anomaly as
28	determined by a nationally accredited cleft-craniofacial team.
29	(2) A nationally accredited cleft-craniofacial team for cleft-
30	craniofacial conditions shall:
31	(A) Evaluate persons with craniofacial anomalies; and
32	(B) Coordinate a treatment plan for each person.
33	(3) After one (1) denial or any limitation of coverage that is based
34	on the lack of medical necessity to improve a functional impairment, the case
35	shall be referred for an external review under State Insurance Department
36	<u>Rule 76, the Arkansas External Review Regulation.</u>

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1	(b) Medical care coverage required under this section includes
2	corrective surgery, dental care, vision care, and the use of at least one (1)
3	hearing aid.
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5	23-79-1503. Rules.
6	The State Insurance Department shall develop and promulgate rules for
7	the implementation and administration of this subchapter.
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9	/s/Hawthorne
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12	APPROVED: 04/15/2013
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