

2 State of Arkansas  
3 92nd General Assembly  
4 Regular Session, 2019

# A Bill

ANS/ANS  
HOUSE BILL

5  
6 By: Representative Dotson

7 Filed with: Arkansas Legislative Council  
8 pursuant to A.C.A. §10-3-217.

## 9 For An Act To Be Entitled

10 AN ACT TO REQUIRE A PHYSICIAN TO UTILIZE TREATMENT  
11 ALTERNATIVES BEFORE PRESCRIBING AN OPIOID; AND FOR  
12 OTHER PURPOSES.

## 13 14 15 Subtitle

16 TO REQUIRE A PHYSICIAN TO UTILIZE  
17 TREATMENT ALTERNATIVES BEFORE PRESCRIBING  
18 AN OPIOID.

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

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23 SECTION 1. Arkansas Code Title 17, Chapter 95, Subchapter 1, is  
24 amended to add an additional section to read as follows:

25 17-95-109. Treatment of pain.

26 (a) If a patient that seeks treatment for a condition that causes  
27 pain, then a physician shall refer or prescribe to the patient any of the  
28 following treatment alternatives, based on the physician's clinical judgment  
29 and the availability of the treatment, before the physician prescribes an  
30 opioid for the treatment of pain:

- 31 (1) Acupuncture;  
32 (2) Chiropractic services;  
33 (3) A chronic pain management program;  
34 (4) Massage therapy;  
35 (5) Occupational therapy;  
36 (6) Osteopathic manipulation; or

1           (7) Physical therapy.

2           (b) This section does not require a physician to refer or prescribe  
3 all of the treatment alternatives listed under subsection (a) of this section  
4 before prescribing an opioid for a patient.

5           (c) This section does not prohibit a physician from simultaneously  
6 prescribing an opioid and prescribing or recommending any of the treatment  
7 alternatives listed in subsection (a) of this section.

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9           SECTION 2. Arkansas Code Title 23, Chapter 99, Subchapter 11, is  
10 amended to add an additional section to read as follows:

11           23-99-1119. Treatment of pain.

12           (a) If a subscriber's treatment alternatives require prior  
13 authorization and are ordered by a healthcare provider, then a healthcare  
14 insurer shall not deny prior authorization for coverage of, at a minimum,  
15 twenty (20) visits per event of:

16                   (1) Chiropractic services;

17                   (2) Chronic pain management provided by a chronic pain  
18 management program;

19                   (3) Occupational therapy;

20                   (4) Osteopathic manipulation; and

21                   (5) Physical therapy.

22           (b)(1) A patient may seek treatment for chiropractic services, chronic  
23 pain management provided by a chronic pain management program, occupational  
24 therapy, osteopathic manipulation, or physical therapy before seeking  
25 treatment from a healthcare provider, and the treatment shall not require a  
26 healthcare provider referral as a condition of coverage under a health  
27 benefit plan.

28           (2) A deductible, coinsurance, or copay required for any of the  
29 healthcare services listed in subsection (a) of this section shall not be  
30 greater than the deductible, coinsurance, or copay required for a primary  
31 care visit.

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34 Referred by Representative Dotson

35 Prepared by: ANS/ANS

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