## ARKANSAS SENATE

87th General Assembly - Regular Session, 2009 **Amendment Form** 

Subtitle of Senate Bill No. 940 "AN ACT TO REQUIRE HEALTH INSURANCE COVERAGE FOR CRANIOFACIAL RECONSTRUCTION UNDER CERTAIN CONDITIONS."

## Amendment No. 1 to Senate Bill No. 940.

Amend Senate Bill No. 940 as originally introduced:

Delete everything after the enacting clause and substitute the following: "SECTION 1. Arkansas Code Title 23, Chapter 86 is amended to add an additional subchapter to read as follows:

23-86-601. Title.

This subchapter shall be known and may be cited as the "Reconstructive Surgery Act of 2009".

23-86-602. Definitions.

As used in this subchapter:

(1) "Cosmetic surgery" means surgery that is performed to alter or reshape normal structures of the body in order to improve appearance; and (2)(A) "Reconstructive surgery" means any medically necessary and appropriate surgery performed to correct or repair abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumors, or disease to:

(i) Improve functions; or

(ii) Give the patient a normal appearance, to the extent possible, in the judgment of the physician performing the surgery. (B) "Reconstructive surgery" does not include dental surgery.

23-86-603. Coverage for reconstructive surgery.

A group health plan and a health insurance issuer offering group health insurance coverage in connection with a group health plan that provides coverage for surgery shall provide coverage for reconstructive surgery, including medically necessary treatment for preoperative and postoperative care as determined by the treating physician or team of physicians.

23-86-604. Construction.

This subchapter does not require a group health plan or health insurance issuer in connection with a group health plan to provide coverage for cosmetic surgery.

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- 23-86-605. Applicability.
- (a) This subchapter applies to health insurance coverage offered, sold, issued, renewed, or in effect on and after the effective date of this act.
- (b)(1) For a group health plan maintained under one (1) or more collective bargaining agreements between employee representatives and one (1) or more employers ratified before the effective date of this act, this subchapter does not apply to plan years beginning before the later of:
- (A) The date on which the last collective bargaining agreement relating to the plan terminates; or
  - (B) January 1, 2010.
- (2) A plan amendment made under a collective bargaining agreement relating to the plan that amends the plan solely to conform to any requirement under § 23-86-603 is not a termination of the collective bargaining agreement under subdivision (b)(1)(A) of this section."

The Amendment was read the first time, rules suspended and read the second time and	
By: Senator Elliott	
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MGF340	Secretary