

PURPOSE OF BILL

To require the Arkansas Medicaid program and insurance policies to reimburse for behavioral health services provided in certain settings, and for other purposes.

ACTUARIAL STATEMENT

The Fiscal Impact Statement was prepared according to generally accepted actuarial principles and practices, in compliance with ACT 112. The Statement provides an estimate of the financial and actuarial effect of the proposed change(s) on the Plans, if possible. The Statement makes no comment or opinion with regard to the merits of the measure for which the Statement is prepared; however, any identified technical or mechanical defects have been noted.

We have reviewed the input and results of our analysis for reasonableness and relied upon the data and information provided by the Plans and their Claims Processing Contractors.

A handwritten signature in black ink, appearing to read "Patrick Klein".

3/3/2023

Patrick Klein, FSA, MAAA
Vice President

Date

A handwritten signature in black ink, appearing to read "Matthew Kersting".

3/3/2023

Matthew Kersting, FSA, MAAA
Vice President

Date

PROJECTED COSTS

Plan	Plan Design Change	Estimated Cost/(Savings)
EBD	No Change	No Impact
UOA	No Change	No Impact
ASU	No Change	No Impact
UCA	No Change	No Impact
AHEC	No Change	No Impact
NWACC	No Change	No Impact
SAU	No Change	No Impact

PRICING APPROACH AND COMMENTS

House Bill 1129 requires self-insured health plans to cover behavioral health services. The coverage for screening for behavioral health and coverage for behavioral health services by a government self-insured plan is subject to any health benefit plan provisions that apply to other services covered by the health benefit plan. The health plans confirmed that these services are already covered.