EXHIBIT D6

1	INTERIM STUDY PROPOSAL 2021-141	
2	State of Arkansas	
3	93rd General Assembly A Bill ANS/AN	1S
4	Third Extraordinary Session, 2022 HOUSE BIL	L
5		
6	By: Representative Pilkington	
7	Filed with: House Committee on Insurance and Comme	rce
8	pursuant to A.C.A. §10-3-2	17
9	For An Act To Be Entitled	
10	AN ACT TO REGULATE THE REIMBURSEMENT RATE OF A BIRTH	
11	UNDER AN INSURANCE POLICY IN THIS STATE; TO ESTABLISH	
12	THE REIMBURSEMENT RATE FOR A BIRTH TO BE AT LEAST THE	
13	SAME AS THE REIMBURSEMENT RATE FOR A BIRTH BY	
14	CESAREAN SECTION; AND FOR OTHER PURPOSES.	
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17	Subtitle	
18	TO REGULATE THE REIMBURSEMENT RATE OF A	
19	BIRTH UNDER AN INSURANCE POLICY IN THIS	
20	STATE; AND TO ESTABLISH THE REIMBURSEMENT	
21	RATE FOR A BIRTH TO BE AT LEAST THE SAME	
22	AS THE REIMBURSEMENT RATE FOR A BIRTH BY	
23	CESAREAN SECTION.	
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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 79, Subchapter 1, is	
29	amended to add an additional section to read as follows:	
30	23-79-168. Reimbursement rate for births — Legislative findings —	
31	<u>Definitions.</u>	
32	(a) The General Assembly finds that:	
33	(1) Approximately ten thousand (10,000) babies are born per day	<u>r</u>
34	in the United States;	
35	(2) Of those ten thousand (10,000) babies, approximately one-	
36	third (1/3) of the births are delivered by Cesarean section instead of	

1	vaginal delivery;
2	(3) Healthcare professionals are generally paid more for a birth
3	by Cesarean section than for a vaginal birth; and
4	(4) The reimbursement rate for a birth in this state needs to be
5	equitable and no less than the established reimbursement rate of a birth by
6	Cesarean section under a health benefit plan.
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8	(b) As used in this section:
9	(1) "Birth" means delivery of a newborn child either by vaginal
10	delivery or Cesarean section;
11	(2)(A) "Health benefit plan" means:
12	(i) An individual, blanket, or group plan or a
13	policy or contract for healthcare services issued or delivered by a
14	healthcare insurer; and
15	(ii) Any health benefit program receiving state or
16	federal appropriations from the State of Arkansas, including the Arkansas
17	Medicaid Program and the Arkansas Health and Opportunity for Me Program, or
18	any successor program.
19	(B) "Health benefit plan" includes:
20	(i) Indemnity and managed care plans; and
21	(ii) Nonfederal governmental plans as defined in 29
22	U.S.C. § 1002(32), as it existed on January 1, 2024.
23	(C) "Health benefit plan" does not include:
24	(i) A disability income plan;
25	(ii) A credit insurance plan;
26	(iii) Insurance coverage issued as a supplement to
27	liability insurance;
28	(iv) A medical payment under automobile or
29	homeowner's insurance plans;
30	(v) A health benefit plan provided under Arkansas
31	Constitution, Article 5, § 32, the Workers' Compensation Law, § 11-9-101 et
32	seq., or the Public Employee Workers' Compensation Act, § 21-5-601 et seq.;
33	(vi) A plan that provides only indemnity for
34	hospital confinement;
35	(vii) An accident-only plan;
36	<u>(viii) A specified disease plan;</u>

1	(ix) A long-term-care-only plan;
2	(x) A dental-only plan; or
3	(xi) A vision-only plan;
4	(3) "Healthcare insurer" means an entity subject to the
5	insurance laws of this state or the jurisdiction of the Insurance
6	Commissioner that contracts or offers to contract to provide health insurance
7	coverage, including without limitation an insurance company, a health
8	maintenance organization, a hospital medical service corporation, a self-
9	insured governmental or church plan in this state, or the Arkansas Medicaid
10	Program;
11	(4) "Healthcare professional" means a person who is licensed,
12	certified, or otherwise authorized by the laws of this state to administer
13	health care in the ordinary course of the practice of his or her profession;
14	<u>and</u>
15	(5) "Reimbursement rate" means the amount paid to a healthcare
16	professional by a healthcare insurer for certain procedures based on Current
17	Procedural Terminology codes or the Healthcare Common Procedure Coding System
18	codes and the costs of healthcare services.
19	(c) A healthcare insurer shall use the reimbursement rate for a birth
20	by Cesarean section to reimburse a healthcare professional for a birth in
21	this state.
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24	Referred by Representative Pilkington
25	Prepared by: ANS/ANS
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