1	State of Arkansas	As Engrossed: H3/19/01		
2	83rd General Assembly	A Bill		
3	Regular Session, 2001		HOUSE BILL 2363	
4				
5	By: Representative Roebuck			
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8		For An Act To Be Entitled		
9	AN ACT TO PROVIDE OPTIONAL COVERAGE FOR TREATMENT			
10	OF THE BONES AND JOINTS OF THE FACE, HEAD AND			
11	NECK IN	THE SAME MANNER AS COVERAGE FOR TREA	ATMENT	
12	OF OTHE	R BONES AND JOINTS OF THE HUMAN BODY;	; AND	
13	FOR OTH	ER PURPOSES.		
14		G - 1.1.		
15		Subtitle		
16		PROVI DE <i>OPTI ONAL</i> COVERAGE FOR TREATMEN		
17		THE BONES AND JOINTS OF THE FACE, HEAD		
18		NECK IN THE SAME MANNER AS COVERAGE I	FOR	
19		TMENT OF OTHER BONES AND JOINTS OF		
20	THE	HUMAN BODY.		
21				
22				
23	BE IT ENACTED BY THE	GENERAL ASSEMBLY OF THE STATE OF ARKA	ANSAS:	
24				
25		(1) Every heal th carrier shall offer		
26		ans for the medical treatment of musc		
27	-	ny bone or joint in the face, neck or		
28		nt disorder and craniomandibular disc	<u>order. Treatment</u>	
29		rgi cal and nonsurgi cal procedures.		
30		coverage shall be provided for medic		
31	-	nt of these conditions whether they a		
32		genital defect, developmental defect,		
33		coverage shall be the same as that p		
34		disorder in the body and shall be pr	oviaea whether	
35 36		tered by a physician or dentist. holder shall accept or reject the one	tional coverage in	
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1	writing on the application. The application shall specifically and		
2	conspicuously inform the policyholder that rejection of the option means tha		
3	covered benefits provided to insureds or enrollees will not include		
4	"temporomandi bul ar joint di sorder (TMJ) or crani omandi bul ar di sorder."		
5	(c) Nothing herein shall prevent an insurer from including such		
6	coverage for any or all musculoskeletal disorders affecting any bone or joint		
7	in the face, neck or head as part of a policy's basic coverage, in lieu of		
8	offering optional coverage.		
9	(d) This act shall apply to those health care plans issued, delivered,		
10	renewed, extended, amended, or modified on or after the effective date of		
11	this act.		
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13	SECTION 2. <u>Definitions.</u>		
14	(1)(A) "Health care plan" means any individual, blanket, or group plan,		
15	policy, or contract for health care services issued or delivered by a carrier		
16	in this state, including indemnity and managed care plans.		
17	(B) "Health care plan" does not mean a plan that provides		
18	coverage only for:		
19	(i) A specified accident or accident-only coverage or		
20	long-term care insurance as defined in the Long-Term Care Insurance Act.		
21	(ii) A Medicare supplement policy of insurance, as defined		
22	by the Insurance Commissioner by regulation;		
23	(iii) Coverage under a plan through Medicare, Medicaid, or		
24	the Federal Employees Health Benefit Program;		
25	(iv) Any coverage issued under Chapter 55 of Title 10 of		
26	the U.S. Code, existing on January 1, 2001, and any coverage issued as		
27	supplemental to that coverage; and		
28	(v) Any coverage issued as supplemental to liability		
29	insurance, workers' compensation or similar insurance;		
30	(2) "Health carrier" means any accident and health insurance company,		
31	referred to in law as "disability" insurance company, hospital or medical		
32	services corporation, or health maintenance organization (including a so-		
33	called dental maintenance organization), issuing or delivering health care		
34	plans in this state.		
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36	SECTION 3. If any provision of this act or the application thereof to any		

1	person or circumstance is held invalid, the invalidity shall not affect other		
2	provisions or applications of the act which can be given effect without the		
3	invalid provision or application, and to this end the provisions of this act		
4	are declared to be severable.		
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6	/s/ Roebuck		
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