1	1 State of Arkansas	A 70.111	
2	2 87th General Assembly	A Bill	
3	Regular Session, 2009	HOUSE BILL 1700	0
4	4		
5	5 By: Representatives Moore, T. Baker, Allen	Betts, Blount, T. Bradford, Breedlove, J. Brown, M. Burris,	,
6	Carnine, Carroll, Cash, Cheatham, Cook, Cooper, Davenport, Davis, Dunn, J. Edwards, Hall, Hardy,		
7	Harrelson, Hawkins, House, Hoyt, Lindsey, Lovell, Maxwell, McCrary, Pennartz, Perry, Pierce, Powers,		
8	Rainey, Reep, J. Roebuck, Saunders, G. Smith, Stewart, Tyler, Wagner, Webb, Williams		
9	9 By: Senators Elliott, Bryles, Glover, J. Jeffre	ss, D. Johnson, P. Malone, Salmon, H. Wilkins	
10	0		
11	1		
12	2 For An	Act To Be Entitled	
13	3 AN ACT TO CREATE TH	E ARKIDS FIRST IMPROVEMENT	
14	4 ACT; TO EXPAND COVE	RAGE UNDER THE ARKIDS FIRST	
15	5 PROGRAM; AND FOR O	HER PURPOSES.	
16	6		
17	7	Subtitle	
18	8 THE ARKIDS FIRST	IMPROVEMENT ACT.	
19	9		
20	0		
21	1 BE IT ENACTED BY THE GENERAL ASSE	MBLY OF THE STATE OF ARKANSAS:	
22	2		
23	3 SECTION 1. Arkansas Code §	20-77-1104 is amended to read as follows:	
24	4 20-77-1104. Waiver — Rules		
25	5 (a)(1) The Department of H	uman Services has obtained a waiver from the	•
26	6 Centers for Medicare & Medicaid S	ervices to create and administer the ARKids	
27	7 First Program as set forth in sub	division (b)(1)(Λ)(i) of this section.	
28	8 (2)(A) The Department of H	uman Services shall use its best efforts to	
29	9 obtain any necessary waivers from	the Centers for Medicare & Medicaid	
30	O Services to create and administer	the ARKids First Program as set forth in	
31	l subdivisions (b)(l)(Λ)(ii) and (i	ii) of this section.	
32	2 (B) To the ext	ent the Department of Human Services is	
33	3 unable to obtain a Medicaid waive	r or waivers from the Centers for Medicare &	•
34	4 Medicaid Services necessary to al	low the use of matching federal funds, the	
35	5 Department of Human Services shal	Department of Human Services shall have no obligation to allow enrollment as	
36	required by either subdivision $(b)(1)(A)(ii)$ or (iii) of this section.		

1	(a) As used in this section:	
2	(1)(A) "Health care coverage" means health care insurance	
3	regulated by the State Insurance Department, including without limitation	
4	group and employer-sponsored health insurance plans.	
5	(B) The Department of Human Services may by rule exclude	
6	other plans or coverage from the definition of health care coverage;	
7	(2) "Parity for mental health care" means coverage for the	
8	diagnosis and mental health treatment of mental illnesses and the mental	
9	health treatment of individuals with developmental disabilities under the	
10	same terms and conditions as provided for covered benefits offered under the	
11	program for the treatment of other medical illnesses or conditions and with	
12	no differences in the program in regard to any of the following:	
13	(A) The duration or frequency of coverage;	
14	(B) The dollar amount of coverage; or	
15	(C) Financial requirements.	
16	(3) "Program" means the ARKids First Program.	
17	(b) The Department of Human Services shall administer the program.	
18	(c)(1) The Department of Human Services shall not enroll any	
19	population defined in this section until the Department of Human Services has	
20	sought and obtained approval from the Centers for Medicare & Medicaid	
21	Services necessary to allow the use of matching federal funds to provide	
22	program services to that population.	
23	(2) The Department of Human Services shall apply to the Centers	
24	for Medicare and Medicaid Services for approval to enroll the populations	
25	defined in subdivisions $(d)(4)(B)$ and (C) of this section.	
26	$\frac{(b)(d)}{(d)}$ The Department of Human Services shall administer and	
27	promulgate rules for the program in conformity with a Medicaid waiver or	
28	waivers and in a manner that:	
29	(1) Provides for the automatic assignment of medical payments	
30	due under §§ 20-77-302 and 20-77-307 as a condition of eligibility for	
31	benefits under the uninsured children's program;	
32	(2) Defines the services to be covered under the program,	
33	including without limitation parity for outpatient mental health care;	
34	(3) Establishes a copayment for services received in the program	
35	as determined through rules adopted by the Department of Human Services;	
36	$\frac{(1)(A)}{(4)}$ Defines the population which may receive services	

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     provided or reimbursed through this program by limiting the program to
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     program within the following limitations:
 3
                       (i)(A) Children eighteen (18) years of age or younger
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     without health care coverage who are members of a family with a gross family
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     income not exceeding two hundred percent (200%) two hundred fifty percent
 6
     (250%) of the federal poverty guidelines;
 7
                       (ii)(B) Persons nineteen (19) years of age or older but
8
     less than twenty-one (21) years of age who:
9
                             (a)(i) Are without health care coverage;
10
                             (b)(ii) Are members of a family with a gross family
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     income not exceeding two hundred percent (200%) two hundred fifty percent
12
     (250%) of the federal poverty guidelines;
                             (c)(iii) Are enrolled as full-time students in a
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     public or private college, university, technical institute, technical
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     college, or other institution of higher education located in the state; and
16
                             (d)(iv) Are covered under the ARKids First Program
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     program as set forth in under subdivision \frac{(b)(1)(A)(i)}{(d)(4)} (d)(4)(A) on the day
18
     prior to before becoming age nineteen (19); or
19
                       (iii)(C) Persons twenty-one (21) years of age or older but
     less than twenty-five (25) years of age who:
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21
                             (a)(i) Are without health care coverage;
22
                             (b)(ii) Are members of a family with a gross family
23
     income not exceeding two hundred percent (200%) two hundred fifty percent
24
     (250%) of the federal poverty guidelines;
25
                             (c)(iii) Are enrolled as full-time students in a
26
     public or private college, university, technical institute, technical
27
     college, or other institution of higher education located in the state; and
28
                             (d)(iv) Are covered under the ARKids First Program
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     program as set forth in under subdivision (b)(1)(A)(i)(d)(4)(A) of this
30
     section on the day prior to before becoming age twenty-one (21).
31
           (B)(e) No A person enrolled in the full Medicaid program may shall not
32
     be concurrently enrolled in the ARKids First Program program except as
33
     required by federal law;.
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           (G)(i)(f)(1) Subdivisions (b)(1)(A)(ii) and (iii) of this section
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     shall Subdivisions (d)(4)(B) and (C) of this section apply only to students
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     who enroll as students in a public or private college, university, technical
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     institute, technical college, or other institution of higher education no
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     less than six (6) months after graduation from high school and who maintain a
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     continuous enrollment each consecutive semester thereafter with no periods of
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     time in which the person is not enrolled as a student, excluding regularly
 5
     scheduled summer breaks.
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                 (ii)(2) If a person who has enrolled in the program under
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     subsection (d)(4)(B) or (C)is not enrolled as a student as set forth in
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     subdivision (b)(1)(C)(i) subdivision (f)(1) of this section, the person shall
 9
     not be entitled to health care coverage under the ARKids First Program
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     program and shall not be entitled to later resume coverage following a break
11
     in eligibility;.
12
                 (2) Defines health care coverage as health care insurance
     regulated by the State Insurance Department, specifically including group and
13
     employer-sponsored health insurance plans. The Department of Human Services
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15
     may by rule exclude other plans or coverage from the definition of health
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     care coverage;
17
                 (3) Provides for the automatic assignment of medical payments
     due as set out in §§ 20-77-302 and 20-77-307 as a condition of eligibility
18
19
     for benefits under the uninsured children's program;
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                 (4)(A) Defines the services to be covered under the program,
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     which shall include parity for outpatient mental health care.
22
                       (B) As used in subdivision (4)(A) of this section, "parity
23
     for mental health care" means coverage for the diagnosis and mental health
24
     treatment of mental illnesses and the mental health treatment of those with
     developmental disorders under the same terms and conditions as provided for
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     covered benefits offered under the program for the treatment of other medical
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     illnesses or conditions and with no differences in the program in regard to
28
     any of the following:
29
                             (i) The duration or frequency of coverage;
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                             (ii) The dollar amount of coverage; or
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                             (iii) Financial requirements.
32
           (G) (g) Providers of covered services shall be those providers shall be
33
     enrolled as Medicaid providers, and reimbursement shall be at the rates
34
     established by the program; and.
35
                 (5) Establishes a copayment for services received in the program
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     as permitted by Medicaid waiver and as determined through promulgated rules.
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