State of Arkansas
89th General Assembly
Regular Session, 2013

A Bill

HOUSE BILL 1267

By: Representatives Kerr, Branscum, Carnine, Clemmer, Cozart, Ferguson, Gillam, Gossage, Hobbs, Leding, Linck, Lowery, Magie, Sabin
By: Senators J. Dismang, Holland, J. Hutchinson, J. Key, Rapert

For An Act To Be Entitled

AN ACT TO REQUIRE A PRIOR APPROVAL PROCESS FOR EXPERIMENTAL AND INVESTIGATIONAL SURGICAL PROCEDURES AND MEDICAL DEVICES; AND FOR OTHER PURPOSES.

Subtitle

AN ACT TO REQUIRE A PRIOR APPROVAL PROCESS FOR EXPERIMENTAL AND INVESTIGATIONAL SURGICAL PROCEDURES AND MEDICAL DEVICES.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code Title 23, Chapter 86, Subchapter 1, is amended to add an additional section to read as follows:

23-86-122. Prior approval process for experimental and investigational surgical procedures and medical devices.

(a) "Health carrier" means a health maintenance organization, hospital medical service corporation, or a disability insurance company.

(A) "Health carrier" includes a self-insured governmental or church plan and third-party administrators that administer or adjust disability benefits for a disability insurer, hospital medical service corporation, health maintenance organization, self-insured governmental plan or self-insured church plan.

(B) "Health carrier" does not include:

(i) An automobile insurer paying medical or hospital

benefits under § 23-89-202(1) or a self-insured employer health benefits plan; or

(ii) A person, company, or organization licensed or registered to issue or who issues any insurance policy or insurance contract in this state as described in §§ 23-62-102 and 23-62-104 — 23-62-107 providing medical or hospital benefits for accidental injury or disability.

(b) A health carrier that denies coverage for a specific surgical procedure or medical device cleared or approved for marketing by the United States Food and Drug Administration as experimental, investigational, or both shall develop a process by which a surgeon, before providing the service, may present medical evidence to obtain an exception for the individual patient for coverage of the surgical procedure or medical device, or both.