

State of Arkansas  
89th General Assembly  
Regular Session, 2013

# A Bill

SENATE BILL 277

By: Senators J. Dismang, Burnett, Files, Irvin, Holland, Rapert, B. Sample, G. Stubblefield, J. Woods  
By: Representatives Farrer, D. Altes, E. Armstrong, Hutchison, Ratliff, Wardlaw, Wren

## For An Act To Be Entitled

AN ACT TO REQUIRE INSURANCE COMPANIES TO PAY  
COMPARABLE REIMBURSEMENT TO PHYSICAL THERAPISTS,  
OCCUPATIONAL THERAPISTS, SPEECH-LANGUAGE  
PATHOLOGISTS, AND PHYSICIANS; AND FOR OTHER PURPOSES.

## Subtitle

TO REQUIRE INSURANCE COMPANIES TO PAY  
COMPARABLE REIMBURSEMENT TO PHYSICAL  
THERAPISTS, OCCUPATIONAL THERAPISTS,  
SPEECH-LANGUAGE PATHOLOGISTS, AND  
PHYSICIANS.

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

SECTION 1. Arkansas Code Title 23, Chapter 79, Subchapter 1, is amended to add an additional section to read as follows:

23-79-156. Payment for services rendered by physical therapists, occupational therapists and speech-language pathologists.

(a) As used in this section:

(1) "Licensed physical therapist, occupational therapist, or speech-language pathologist" means:

(A) A physical therapist licensed under §§ 17-93-101 – 17-93-312;

(B) An occupational therapist licensed under the Arkansas Occupational Therapy Practice Act, § 17-88-101 et seq.; and

(C) A speech-language pathologist licensed under §§ 17-



1 100-102 – 17-100-308; and

2 (2) "Licensed primary care physician or osteopath" means a  
3 primary care physician and an osteopath licensed under §§ 17-80-101 – 17-95-  
4 505.

5 (b) An insurer shall not impose a copayment, coinsurance, or an office  
6 visit deductible amount or a combination of a copayment, coinsurance, or an  
7 office visit deductible amount charged to the insured for services rendered  
8 for a date of service by a licensed physical therapist, occupational  
9 therapist, or speech-language pathologist that is greater than the copayment,  
10 coinsurance, or office visit deductible amount charged to the insured for an  
11 office visit for the service of a licensed primary care physician or  
12 osteopath.

13 (c) The amount of copayment or office visit deductible shall not  
14 exceed thirty-five percent (35%) of the allowable fees charged for services.

15 (d) An insurer shall state in its health benefit plan:

16 (1) The availability of physical therapy, occupational therapy,  
17 or speech-language pathologist coverage under its plan; and

18 (2) All related limitations, conditions, and exclusions.