

1 State of Arkansas  
2 95th General Assembly  
3 Regular Session, 2025

# A Bill

HOUSE BILL 1013

4  
5 By: Representative A. Collins  
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## For An Act To Be Entitled

8  
9 AN ACT TO PROTECT FERTILITY TREATMENT RIGHTS IN THIS  
10 STATE; TO PROMOTE THE RIGHT AND ABILITY TO CHOOSE TO  
11 RECEIVE FERTILITY TREATMENT PROVIDED IN ACCORDANCE  
12 WITH WIDELY ACCEPTED AND EVIDENCE-BASED MEDICAL  
13 STANDARDS OF CARE; AND FOR OTHER PURPOSES.  
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## Subtitle

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17 TO PROTECT FERTILITY TREATMENT RIGHTS IN  
18 THIS STATE.  
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20 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
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22 SECTION 1. Arkansas Code Title 20, Chapter 9, is amended to add an  
23 additional subchapter to read as follows:

24 Subchapter 16 – Fertility Treatment Rights

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26 20-9-1601. Definitions.

27 As used in this subchapter:

28 (1) "Fertility treatment" means:

29 (A) Preservation of human oocytes, sperm, or embryos for  
30 later reproductive use;

31 (B) Artificial insemination, including intravaginal  
32 insemination, intracervical insemination, and intrauterine insemination;

33 (C) Assisted reproductive technology, including in vitro  
34 fertilization and other treatments or procedures in which reproductive  
35 genetic material, such as oocytes, sperm, fertilized eggs, and embryos are  
36 handled, when clinically appropriate;



1                   (D) Genetic testing of embryos;

2                   (E) Medications prescribed or obtained over-the-counter,  
 3 as indicated for fertility;

4                   (F) Gamete donation; and

5                   (G) Such other information, referrals, treatments,  
 6 procedures, medications, laboratory testing, technologies, and services  
 7 relating to fertility as deemed appropriate by the Secretary of the United  
 8 States Department of Health and Human Services;

9                   (2) "Healthcare provider" means an entity or individual that:

10                   (A) Is engaged or seeks to engage in the delivery of  
 11 fertility treatment, including through evidence-based information,  
 12 counseling, referrals, or items and services relating to, aiding in, or  
 13 providing fertility treatment; and

14                   (B) Is licensed, certified, permitted, or otherwise  
 15 authorized by the state to engage in the delivery of services relating to,  
 16 aiding in, or providing fertility treatment;

17                   (3)(A) "Healthcare insurer" means an insurance company,  
 18 insurance service, or insurance organization, including a health maintenance  
 19 organization, which is licensed to engage in the business of insurance in  
 20 this state.

21                   (B) "Healthcare insurer" does not include a group health  
 22 plan as defined by 42 U.S.C. § 300gg-91, as existing on January 1, 2025;

23                   (4) "Manufacturer" means manufacturer of a drug or device  
 24 approved, cleared, authorized, or licensed under the Federal Food, Drug, and  
 25 Cosmetic Act, as existing on January 1, 2025, or 42 U.S.C. § 262, as existing  
 26 on January 1, 2025, or otherwise legally marketed; and

27                   (5) "Widely accepted and evidence-based medical standards of  
 28 care" means medical services, procedures, and practices that are in  
 29 accordance with the guidelines of the American Society for Reproductive  
 30 Medicine.

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 32                   20-9-1602. Individual fertility treatment rights.

33                   An individual has a right without prohibition, limitation,  
 34 interference, or impediment to:

35                   (1) Receive fertility treatment from a healthcare provider, in  
 36 accordance with widely accepted and evidence-based medical standards of care;

1           (2) Continue or complete an ongoing fertility treatment  
2 previously initiated by a healthcare provider, in accordance with widely  
3 accepted and evidence-based medical standards of care;

4           (3) Make decisions and arrangements regarding the donation,  
5 testing, use, storage, or disposition of reproductive genetic material, such  
6 as oocytes, sperm, fertilized eggs, and embryos; and

7           (4) Establish contractual agreements with a healthcare provider  
8 relating to the healthcare provider's services in handling, testing, storing,  
9 shipping, and disposing of the individual's reproductive genetic material in  
10 accordance with widely accepted and evidence-based medical standards of care.

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12           20-9-1603. Healthcare provider rights.

13           A healthcare provider has a right without prohibition, limitation,  
14 interference, or impediment to:

15           (1) Provide or assist with fertility treatment provided in  
16 accordance with widely accepted and evidence-based medical standards of care;

17           (2) Continue, complete, or assist with fertility treatment that  
18 was lawful when commenced and is provided in accordance with widely accepted  
19 and evidence-based medical standards of care;

20           (3) Provide for or assist with the testing, use, storage, or  
21 disposition of reproductive genetic material, such as oocytes, sperm,  
22 fertilized eggs, and embryos, in accordance with widely accepted and  
23 evidence-based medical standards of care; and

24           (4) Establish contractual agreements with individuals or  
25 manufacturers relating to the healthcare provider's services in handling,  
26 testing, storing, shipping, and disposing of an individual's reproductive  
27 genetic material.

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29           20-9-1604. Healthcare insurer rights.

30           A healthcare insurer has a right without prohibition, limitation,  
31 interference, or impediment to cover fertility treatment provided in  
32 accordance with widely accepted and evidence-based medical standards of care.

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34           20-9-1605. Manufacturer rights

35           A manufacturer has a right without prohibition, limitation,  
36 interference, or impediment to manufacture, import, market, sell, and

1 distribute a drug or device legally marketed and intended for use in  
2 providing fertility treatment, including the storage or transport of oocytes,  
3 gametes, fertilized eggs, and embryos.

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5 20-9-1606. Regulation of medicine.

6 The enforcement of state laws regarding medical facilities or  
7 healthcare providers does not constitute a violation of this subchapter if:

8 (1) The state laws or rules are in accordance with widely  
9 accepted and evidence-based medical standards of care for providing fertility  
10 treatment; and

11 (2) The safety or health objective cannot be advanced by a  
12 different means that does not prohibit, limit, interfere with, or impede the  
13 rights described in this subchapter.

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15 20-9-1607. Enforcement.

16 (a) An individual or entity adversely affected by an alleged violation  
17 of this subchapter may commence a civil action against an individual,  
18 employee, official, agency head, contractor, organization, or instrumentality  
19 that enacts, implements, or enforces a limitation or requirement that  
20 prohibits, limits, interferes with, or impedes the rights of an individual, a  
21 healthcare provider, a healthcare insurer, or a manufacturer under this  
22 subchapter.

23 (b) A healthcare provider may commence a civil action for relief on  
24 behalf of the healthcare provider, the healthcare provider's staff, or the  
25 healthcare provider's patients who are or may be adversely affected by an  
26 alleged violation of this subchapter.

27 (c) In any action under this subchapter, the court may award  
28 appropriate equitable relief, including temporary, preliminary, or permanent  
29 injunctive relief.

30 (d)(1) In any action under this subchapter, the court shall award  
31 costs of litigation, as well as reasonable attorney's fees, to any prevailing  
32 plaintiff.

33 (2) A plaintiff is not liable to a defendant for costs or  
34 attorney's fees in any non-frivolous action under this subchapter unless the  
35 costs or attorney's fees are imposed by the court as part of sanctions for  
36 violations committed during the discovery process.