1 2	State of Arkansas 95th General Assembly	A Bill	
2	Regular Session, 2025		SENATE BILL 221
4	Regular Session, 2025		SERVER DILL 221
5	By: Senators B. Davis, J. Disma	ang, Gilmore, B. Johnson, C. Tucker, D. Wallace, C	G. Leding
6	•	, Hudson, Beaty Jr., A. Collins, Achor, K. Brown, I	e
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8		For An Act To Be Entitled	
9	AN ACT TO P	ROHIBIT RISK-BASED PROVIDER ORGANIZAT	IONS
10	FROM USING	CERTAIN TYPES OF CONTRACTING PRACTICES	S
11	WHEN CONTRA	CTING WITH PROVIDERS; TO AMEND THE	
12	MEDICAID PR	OVIDER-LED ORGANIZED CARE ACT; TO DECI	LARE
13	AN EMERGENC	Y; AND FOR OTHER PURPOSES.	
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16		Subtitle	
17	TO PRC	DHIBIT RISK-BASED PROVIDER	
18	ORGANI	ZATIONS FROM USING CERTAIN TYPES	
19	OF CON	TRACTING PRACTICES WHEN	
20	CONTRA	ACTING WITH PROVIDERS; TO AMEND THE	
21	MEDICA	AID PROVIDER-LED ORGANIZED CARE	
22	ACT; A	AND TO DECLARE AN EMERGENCY.	
23			
24	BE IT ENACTED BY THE GE	NERAL ASSEMBLY OF THE STATE OF ARKANSA	AS:
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26	SECTION 1. Arkan	sas Code Title 20, Chapter 77, Subchap	pter 27, is
27	amended to add an addit	ional section to read as follows:	
28	<u>20-77-2709. Proh</u>	ibitions on discrimination and tying o	<u>of services in</u>
29	contracts with risk-bas	ed provider organizations — Legislativ	<u>ve findings.</u>
30	(a) The General	Assembly finds that:	
31	<u>(1) Risk-b</u>	ased provider organizations, also know	<u>wn as provider-</u>
32	led shared savings enti	ties, have engaged in unfair tactics w	with direct
33	service providers;		
34	<u>(2) When a</u>	provider will not agree to below cost	<u>ts rates for one</u>
35	(1) service, the risk-b	ased provider organization terminates	the direct
36	service provider's netw	ork status for all other services;	



1	(3) This practice is often referred to as "tying" or "all or
2	nothing" and restricts access to healthcare services by reducing the number
3	of providers available to serve individuals with disabilities; and
4	(4) These negotiating tactics diminish or eliminate the ability
5	of the provider to fairly negotiate rates with the risk-based provider
6	organization.
7	(b) A risk-based provider organization shall not:
8	(1) Tie contracting for one (1) service to another service
9	against a direct service provider's will;
10	(2) Penalize, terminate, or refuse network admission to a direct
11	service provider who agrees to the terms and conditions for at least one (1)
12	service offered by the risk-based provider organization on the basis that the
13	provider has declined to provide one (1) or more other services on the terms
14	and conditions that the direct service provider is not willing to accept; or
15	(3) Discriminate against or penalize in any way a provider for
16	exercising the rights under this section.
17	(c)(1) A violation of this section is:
18	(A) An unfair trade practice under the Trade Practices
19	<u>Act, § 23-66-201 et seq.;</u>
20	(B) A violation of the Patient Protection Act of 1995, 23-
21	<u>99-201 et seq.;</u>
22	(C) A violation of the any willing provider laws under §
23	<u>23-99-801 et seq.; and</u>
24	(D) A violation of the Unfair Practices Act, § 4-75-201 et
25	seq.
26	(2) If a healthcare contract with a risk-based provider
27	organization contains a provision that violates this section, that provision
28	<u>is void.</u>
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30	SECTION 2. EMERGENCY CLAUSE. It is found and determined by the
31	General Assembly of the State of Arkansas that contracting and negotiating
32	practices of risk-based provider organizations are negatively impacting the
33	ability of providers to deliver healthcare services to Medicaid
34	beneficiaries; that these practices harm access to healthcare to the most
35	vulnerable individuals such as individuals with disabilities who need
36	healthcare services on an ongoing basis; and that this act is immediately

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1	necessary to protect the health and safety of the most vulnerable populations
2	in the Arkansas Medicaid Program being served by risk-based provider
3	organizations who are restricting healthcare access. Therefore, an emergency
4	is declared to exist, and this act being immediately necessary for the
5	preservation of the public peace, health, and safety shall become effective
6	<u>on:</u>
7	(1) The date of its approval by the Governor;
8	(2) If the bill is neither approved nor vetoed by the Governor,
9	the expiration of the period of time during which the Governor may veto the
10	bill; or
11	(3) If the bill is vetoed by the Governor and the veto is
12	overridden, the date the last house overrides the veto.
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