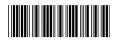
Stricken language would be deleted from and underlined language would be added to present law. Act 124 of the Regular Session

1	State of Arkansas		
2	95th General Assembly	A Bill	
3	Regular Session, 2025		HOUSE BILL 1427
4	-		
5	By: Representatives Pilking	gton, Wardlaw, Hudson, L. Johnson, Bentley	
6	By: Senators Irvin, B. Davis	s	
7			
8	For An Act To Be Entitled		
9	AN ACT TO CREATE THE HEALTHY MOMS, HEALTHY BABIES		
10	ACT; TO	AMEND ARKANSAS LAW TO IMPROVE MATERNAL	HEALTH
11	IN THIS	STATE; AND FOR OTHER PURPOSES.	
12			
13			
14		Subtitle	
15	TO	CREATE THE HEALTHY MOMS, HEALTHY	
16	BAB	BIES ACT; AND TO AMEND ARKANSAS LAW TO	
17	IMP	PROVE MATERNAL HEALTH IN THIS STATE.	
18			
19	BE IT ENACTED BY THE	GENERAL ASSEMBLY OF THE STATE OF ARKAN	ISAS:
20			
21	SECTION 1. DO	NOT CODIFY. <u>Title.</u>	
22	This act shall	be known and may be cited as the "Heal	thy Moms, Healthy
23	Babies Act".		
24			
25		kansas Code § 20-77-151 is repealed to	be reenacted and
26		er subchapter of the Arkansas Code.	
27	-	ression screening for pregnant women.	
28		sas Medicaid Program shall reimburse fo	r depression
29	screening of a pregn		
30	-	tment of Human Services shall apply for	•
31		te plan amendments, or other authority	necessary to
32	implement this secti	01.	
33	ODOMION O	1 0 1 7 1 00 01 1 77 1	1 1
34		kansas Code Title 20, Chapter 77, is an	lended to add an
35	additional subchapte	r to read as follows:	
36		<u> Subchapter 29 — Maternal Health</u>	



1			
2	20-77-2901. Depression screening for pregnant women.		
3	(a) The Arkansas Medicaid Program shall reimburse for depression		
4	screening of a pregnant woman.		
5	(b) The Department of Human Services shall apply for any federal		
6	waiver, Medicaid state plan amendments, or other authority necessary to		
7	implement this section.		
8			
9	20-77-2902. Coverage of prenatal, delivery, and postpartum services.		
10	(a) The Arkansas Medicaid Program shall reimburse for prenatal,		
11	delivery, and postpartum services separately in lieu of a global payment or		
12	an all-inclusive payment methodology for maternity services.		
13	(b) Prenatal, delivery, and postpartum services include without		
14	<u>limitation:</u>		
15	(1) Office visits;		
16	(2) Laboratory fees;		
17	(3) Physician ordered testing;		
18	(4) Blood work;		
19	(5) Remote monitoring;		
20	(6) Fetal nonstress tests; and		
21	(7) Continuous glucose monitors or other services for		
22	gestational diabetes when medically necessary.		
23	(c) This section does not alter coverage provided through the Arkansas		
24	Health and Opportunity for Me Program or a risk-based provider organization		
25	under the Medicaid Provider-Led Organized Care Act, § 20-77-2701 et seq.		
26			
27	20-77-2903. Presumptive eligibility for pregnant women.		
28	(a) The Arkansas Medicaid Program shall make presumptive eligibility		
29	determinations for pregnant women who are applying for the program to improve		
30	access to prenatal care and allow prenatal care to be delivered immediately		
31	while waiting for a full application to be processed.		
32	(b) The program may designate one (1) or more qualified entities to		
33	screen for eligibility and immediately enroll pregnant women into the		
34	program.		
35			
36	20-77-2904. Blood pressure monitoring for pregnant and postpartum		

1	women.		
2	(a) The Arkansas Medicaid Program shall provide coverage and		
3	reimbursement for self-measurement blood pressure monitoring services for		
4	pregnant women and postpartum women.		
5	(b) Self-measurement blood pressure monitoring services shall include:		
6	(1) Validated blood pressure monitoring devices, such as a blood		
7	pressure cuff and replacement cuffs, as medically necessary, to diagnose or		
8	treat hypertension;		
9	(2) Patient education and training on the set-up and use of a		
10	self-measurement blood pressure measurement device that is validated for		
11	clinical accuracy, device calibration, and the procedure for obtaining self-		
12	measurement readings; and		
13	(3) Collection of data reports by the patient or caregiver for		
14	submission to a healthcare provider to communicate blood pressure readings		
15	and create or modify treatment plans.		
16			
17	20-77-2905. Reimbursement for remote ultrasound procedures.		
18	(a)(1) The Arkansas Medicaid Program shall reimburse for medically		
19	necessary remote ultrasound procedures utilizing established Current		
20	Procedural Terminology codes for remote ultrasound procedures when the		
21	patient is in a residence or other off-site location from the healthcare		
22	provider of the patient and the same standard of care is met.		
23	(2) Subdivision (a)(1) of this section shall apply to the fee-		
24	for-service categories of the program and any managed care plan within the		
25	program.		
26	(b) A remote ultrasound procedure shall be reimbursable when the		
27	healthcare provider uses digital technology that:		
28	(1) Collects medical and other forms of health data from a		
29	patient and electronically transmits the information securely to a healthcare		
30	provider in a different location for interpretation and recommendation;		
31	(2) Is compliant with the Health Insurance Portability and		
32	Accountability Act of 1996, 42 U.S.C. § 1320d et seq., as it existed on		
33	January 1, 2025; and		
34	(3) Is approved by the United States Food and Drug		
35	Administration.		

36

1	20-77-2906. Coverage for certain services provided by doulas and		
2	community health workers.		
3	The Arkansas Medicaid Program shall reimburse doulas and community		
4	health workers for home visitation related to prenatal care and postpartum		
5	care.		
6			
7	20-77-2907. Implementation and rules.		
8	The Department of Human Services shall:		
9	(1) Apply for any federal waiver, Medicaid state plan		
10	amendments, or other authority necessary to implement this subchapter; and		
11	(2) Adopt rules to implement this subchapter.		
12			
13	SECTION 4. Arkansas Code § 16-114-203(c), concerning the statute of		
14	limitations, is amended to read as follows:		
15	(c)(l) $\frac{1}{1}$ Except as otherwise provided in this subsection, if an		
16	individual is nine (9) years of age or younger at the time of the act,		
17	omission, or failure complained of, the minor or person claiming on behalf of		
18	the minor shall have until the later of the minor's eleventh birthday or two		
19	(2) years from the act, omission, or failure in which to commence an action.		
20	(2) However, if $\underline{\text{If}}$ no medical injury is known and could not		
21	reasonably have been discovered prior to the minor's eleventh birthday, then		
22	the minor or his or her representative shall have until two (2) years after		
23	the medical injury is known or reasonably could have been discovered, or		
24	until the minor's nineteenth birthday, whichever is earlier, in which to		
25	commence an action.		
26	(3) If an alleged medical injury occurred during childbirth, the		
27	minor or his or her representative shall have until the minor's fifth		
28	birthday to commence an action.		
29			
30			
31	APPROVED: 2/20/25		
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36			