Stricken language would be deleted from and underlined language would be added to present law. Act 423 of the Regular Session

1 2	State of Arkansas As Engrossed: $H2/10/25$ $H2/13/25$ $H2/20/25$ $H2/27/25$ $S3/19/25$ 95th General Assembly \mathbf{A} \mathbf{Bill}
3	Regular Session, 2025 HOUSE BILL 1288
4	
5	By: Representative L. Johnson
6	By: Senator Irvin
7	
8	For An Act To Be Entitled
9	AN ACT TO AMEND THE ARKANSAS HEALTH CARE CONSUMER
10	ACT; TO REQUIRE A HEALTHCARE INSURER TO MAKE CERTAIN
11	RETROACTIVE PAYMENTS TO A PROVIDER UPON CREDENTIALING
12	OF A PROVIDER; AND FOR OTHER PURPOSES.
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15	Subtitle
16	TO AMEND THE ARKANSAS HEALTH CARE
17	CONSUMER ACT; AND TO REQUIRE A
18	HEALTHCARE INSURER TO MAKE CERTAIN
19	RETROACTIVE PAYMENTS TO A PROVIDER UPON
20	CREDENTIALING OF A PROVIDER.
21	
22	BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
23	
24	SECTION 1. Arkansas Code § 23-99-411(a)(6), concerning the payment
25	responsibility of a healthcare insurer to a participating provider, is
26	amended to read as follows:
27	(6) $\underline{(A)(i)}$ For Except as provided in subdivision (a)(6)(B) of
28	this section, for payment purposes, a healthcare insurer shall treat an
29	applicant physician as a participating physician from the date of submission
30	of a <u>substantially</u> completed application once an applicant physician has been
31	approved through an insurer's credentialing process.
32	(ii) As used in subdivision (a)(6)(A)(i) of this
33	section, "date of submission of a substantially completed application" means
34	the date a healthcare insurer receives an applicant physician's
35	credentialling information, as defined under § 17-95-107, from the
36	Centralized Credentials Verification Service of the Arkansas State Medical

1	Board.
2	(B) Subdivision (a)(6)(A) of this section does not apply
3	to the Arkansas Medicaid Program.
4	/s/L. Johnson
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7	APPROVED: 4/3/25
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