



ARKANSAS
INSURANCE
DEPARTMENT



Hugh McDonald
SECRETARY OF COMMERCE

Jimmy Harris
COMMISSIONER
ARKANSAS INSURANCE
DEPARTMENT

April 28, 2026

Senator Tyler Dees, Co-Chair
Representative Matthew Shepherd, Co-Chair
Administrative Rules Subcommittee
Arkansas Legislative Council
Via Rebecca Miller-Rice miller.ricer@blr.arkansas.gov

Re: Request to be Excluded from Promulgating Rules for Act 859 of 2025

Dear Senator Dees and Representative Shepherd;

Pursuant to Arkansas Code § 25-15-216(c), the Arkansas Insurance Department respectfully requests that it be excluded from the requirements of Arkansas Code § 25-15-216(b)(3)-(5), because it believes that promulgation of a rule to implement Act 859 of 2025 is unnecessary at this time.

The RESTORE Act, Act 859 of 2025, requires the Arkansas Insurance Department (AID) to promulgate rules establishing minimum and maximum levels of coverage for restorative reproductive medicine (RRM). Unfortunately, we cannot come up with rules because RRM is still so new. For instance, to our knowledge, no Arkansas based providers provide RRM services. As such, the Department respectfully requests that the Administrative Rules Subcommittee and Arkansas Legislative Council determine that rulemaking is unnecessary and excuse the Department from having to promulgate a rule for Act 859 of 2025.

AID will continue to monitor developments related to RRM implementation and solicit additional input from stakeholders as further information becomes available. Before the end of 2026, AID will reassess whether to proceed with rulemaking to ensure that any rule is well-supported and consistent with the intent of the RESTORE Act.

Sincerely,

A handwritten signature in blue ink, appearing to read "Sara Farris", is written over a horizontal line.

Sara Farris
General Counsel
Arkansas Insurance Department
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Sara.farris@arkansas.gov

1 State of Arkansas
2 95th General Assembly
3 Regular Session, 2025
4

As Engrossed: H3/19/25

A Bill

HOUSE BILL 1142

5 By: Representative A. Brown
6 By: Senator J. Dotson
7

For An Act To Be Entitled

9 AN ACT TO CREATE THE REPRODUCTIVE EMPOWERMENT AND
10 SUPPORT THROUGH OPTIMAL RESTORATION (RESTORE) ACT;
11 AND FOR OTHER PURPOSES.
12
13

Subtitle

15 TO CREATE THE REPRODUCTIVE EMPOWERMENT
16 AND SUPPORT THROUGH OPTIMAL RESTORATION
17 (RESTORE) ACT.
18

19 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
20

21 SECTION 1. DO NOT CODIFY. Title.

22 This act shall be known and may be cited as the "Reproductive
23 Empowerment and Support Through Optimal Restoration (RESTORE) Act".
24

25 SECTION 2. Arkansas Code Title 20, Chapter 16, is amended to add an
26 additional subchapter to read as follows:

27 Subchapter 26 – Reproductive Empowerment and Support Through Optimal
28 Restoration Act
29

30 20-16-2601. Title.

31 This subchapter shall be known and may be cited as the "Reproductive
32 Empowerment and Support Through Optimal Restoration Act".
33

34 20-16-2602. Legislative findings.

35 The General Assembly finds that:

36 (1) There is a growing interest among women to proactively



1 assess their overall health and understand how factors such as age and
2 medical history contribute to reproductive health and fertility;

3 (2)(A) Women are worthy of the highest standard of medical care,
4 including the opportunity to assess, understand, and improve their
5 reproductive health.

6 (B) Unfortunately, many women do not receive adequate
7 information about their reproductive health and do not have access to
8 restorative reproductive medicine;

9 (3) Reproductive health conditions are the leading causes of
10 infertility, which affects fifteen to sixteen percent (15-16%) of couples in
11 the United States;

12 (4) Research shows four (4) or more conditions or factors are
13 the cause of most female infertility;

14 (5) There is a gap in research and care for female reproductive
15 health conditions, which affects many Americans struggling with unexplained
16 infertility;

17 (6) Restorative reproductive medicine aims to diagnose and treat
18 underlying hormonal and other imbalances, restore health when possible, and
19 improve women's health functioning and long-term outcomes;

20 (7) Restorative reproductive medicine can eliminate barriers to
21 successful conception, pregnancy, and birth as well as address some causes of
22 recurrent miscarriages; and

23 (8) Restorative reproductive medicine often alleviates some
24 difficult symptoms associated with reproductive health conditions, including
25 hormonal acne, hormonal weight gain, hormonal mood changes and depression,
26 painful menstruation, painful flare-ups, bloating, inflammation, heavy
27 menstruation, irregular menstruation, nerve pain, bowel symptoms, pain during
28 sexual intercourse, and back pain.

29
30 20-16-2603. Definitions.

31 As used in this subchapter:

32 (1) "Assisted reproductive technology" means a treatment or
33 procedure involving the handling of a human egg, sperm, or embryo outside of
34 the body with the intent of facilitating a pregnancy, including:

35 (A) Artificial insemination;

36 (B) Intrauterine insemination;

1 (C) In vitro fertilization;

2 (D) Gamete intrafallopian fertilization;

3 (E) Zygote intrafallopian fertilization;

4 (F) Egg, embryo, or sperm cryopreservation; and

5 (G) Egg, sperm, or embryo donation;

6 (2)(A) "Fertility awareness-based methods" means modern,
7 evidence-based methods of tracking the menstrual cycle through observable
8 biological signs in a woman, such as body temperature, cervical fluid, or
9 hormone production in the reproductive system, including luteinizing hormone
10 and estrogen.

11 (B) "Fertility awareness-based methods" includes without
12 limitation:

13 (i) Fertility education and medical management;

14 (ii) The symptothermal method;

15 (iii) The Creighton Model FertilityCare System; and

16 (iv) The Billings Ovulation Method;

17 (3) "Fertility education and medical management" means the
18 program developed in collaboration with the Reproductive Health Research
19 Institute for medical research, protocols, and medical training for
20 healthcare professionals in order to enable the clinical application of
21 research advances in reproductive endocrinology, by providing education for
22 women about their bodies and hormonal health and medical support, as
23 appropriate;

24 (4) "Infertility" means a symptom of an underlying disease or
25 condition within a person's body that makes successfully conceiving and
26 carrying a child to term difficult or impossible, which is diagnosed after:

27 (A) Twelve (12) months of sexual intercourse without the
28 use of a chemical, barrier, or other contraceptive method for women under
29 thirty-five (35) years of age; or

30 (B) Six (6) months of targeted sexual intercourse without
31 the use of a chemical, barrier, or other contraceptive method for women who
32 are thirty-five (35) years of age and older, when conception should otherwise
33 be possible;

34 (5) "Natural procreative technology" means an approach to health
35 care that monitors and maintains a woman's reproductive and gynecological
36 health, including laparoscopic gynecologic surgery to reconstruct the uterus,

1 fallopian tubes, ovaries, or other organ structures to eliminate
2 endometriosis and other reproductive health conditions;

3 (6) "Reproductive health condition" means a health condition
4 that makes successfully conceiving a child difficult to impossible when
5 conception should otherwise be possible, including without limitation:

6 (A) Endometriosis;

7 (B) Adenomyosis;

8 (C) Polycystic ovary syndrome;

9 (D) Uterine fibroids;

10 (E) Blocked fallopian tubes;

11 (F) Hormonal imbalances;

12 (G) Hyperprolactinemia;

13 (H) Thyroid conditions; and

14 (I) Ovulation dysfunctions;

15 (7) "Restorative reproductive health" means a scientific
16 approach to reproductive medicine that seeks to cooperate with or restore the
17 normal physiology and anatomy of the human reproductive system, including
18 without limitation:

19 (A) Body literacy programs that incorporate science-based
20 charting methods;

21 (B) Teacher-led reproductive health education;

22 (C) Restorative reproductive medicine;

23 (D) Natural procreative technology;

24 (E) Fertility awareness-based methods; and

25 (F) Fertility education and medical management; and

26 (8)(A) "Restorative reproductive medicine" means a scientific
27 approach to reproductive medicine that seeks to cooperate with or restore the
28 normal physiology and anatomy of the human reproductive system without the
29 use of methods that are inherently suppressive, circumventive, or destructive
30 to natural human functions.

31 (B) "Restorative reproductive medicine" includes:

32 (i) Ultrasounds;

33 (ii) Blood tests;

34 (iii) Hormone panels;

35 (iv) Laparoscopic and exploratory surgeries;

36 (v) Examinations of a patient's overall health and

- 1 lifestyle;
2 (vi) Elimination of environmental endocrine disruptors;
3 (vii) Assessment of the health and fertility of a
4 patient's partner;
5 (viii) Natural procreative technology;
6 (ix) Fertility awareness-based methods; and
7 (x) Fertility education and medical management.

8
9 20-16-2604. Assisted reproductive technology – Discrimination against
10 nonparticipating healthcare providers prohibited.

11 Notwithstanding any other state law, a person or entity that receives
12 state financial assistance or local government assistance shall not penalize,
13 retaliate against, or otherwise discriminate against a healthcare provider on
14 the basis that the healthcare provider does not or declines to:

15 (1) Assist in, receive training in, provide, perform, refer for,
16 pay for, or otherwise participate in assisted reproductive technology; or

17 (2) Facilitate or make arrangements for any of the activities
18 under subdivision (1) of this section in a manner that violates the
19 healthcare provider's sincerely held religious beliefs or moral convictions.

20
21 20-16-2605. Fertility awareness-based methods – Incorporation into
22 Title X programs.

23 (a) All Title X-funded facilities in Arkansas shall include fertility
24 awareness-based methods as part of covered family planning and reproductive
25 health services.

26 (b)(1) The Department of Health shall work with Title X-funded
27 facilities to integrate fertility awareness-based methods into existing
28 programs within twelve (12) months of the effective date of this section.

29 (2) The department shall provide guidance and support to
30 facilities in implementing the fertility awareness-based methods, including:

31 (A) Training for healthcare providers on fertility
32 awareness-based methods; and

33 (B) Development of patient education materials on
34 fertility awareness-based methods.

35 (c) Title X-funded facilities shall allocate a portion of existing
36 Title X funds to cover implementing and providing fertility awareness-based

1 methods.

2

3 20-16-2606. Advancing education on reproductive health conditions.

4 (a) As authorized by state or federal funding, the Department of Health
5 shall integrate information about fertility awareness-based methods into
6 existing public health programs, including:

7 (1) Family planning services;

8 (2) Maternal and child health programs; and

9 (3) Women's health initiatives.

10 (b) Existing health education materials and resources shall be updated
11 to include information on restorative reproductive medicine.

12

13 SECTION 3. Arkansas Code § 23-85-137 is amended to read as follows:

14 23-85-137. In vitro fertilization coverage required – Definitions.

15 (a) As used in this section:

16 (1)(A) "Fertility awareness-based methods" means modern,
17 evidence-based methods of tracking the menstrual cycle of a woman through
18 observable biological signs, including without limitation:

19 (i) Body temperature;

20 (ii) Cervical fluid; or

21 (iii) Hormone production in the reproductive system,
22 including luteinizing hormone and estrogen.

23 (B) "Fertility awareness-based methods" includes without
24 limitation:

25 (i) Fertility education and medical management;

26 (ii) The symptothermal method;

27 (iii) The Creighton Model FertilityCare System; or

28 (iv) Billings Ovulation Method;

29 (2) "Fertility education and medical management" means a program
30 developed in collaboration with the Reproductive Health Research Institute
31 for medical research, protocols, and medical training for healthcare
32 professionals in order to enable the clinical application of research
33 advances in reproductive endocrinology by providing education for a woman
34 about her body and hormonal health and medical support, as appropriate;

35 (3) "Natural procreative technology" means an approach to
36 healthcare services that monitors and maintains a woman's reproductive and

1 gynecological health, including without limitation laparoscopic gynecologic
 2 surgery to reconstruct the uterus, fallopian tubes, ovaries, and other organ
 3 structures, to eliminate endometriosis and other reproductive health
 4 conditions; and

5 (4)(A) "Restorative reproductive medicine" means any scientific
 6 approach to reproductive medicine that seeks to cooperate with or restore the
 7 normal physiology and anatomy of the human reproductive system without the
 8 use of methods that are suppressive, circumventive, or destructive to natural
 9 human functions.

10 (B) "Restorative reproductive medicine" includes without
 11 limitation:

12 (i) An ultrasound;

13 (ii) A blood test;

14 (iii) A hormone panel test;

15 (iv) A Laparoscopic or exploratory surgery;

16 (v) An examination of a patient's overall health and
 17 lifestyle;

18 (vi) Eliminating environmental endocrine disruptors;

19 (vii) Assessing the health and fertility of a
 20 patient's partner;

21 (viii) Natural procreative technology;

22 (ix) Fertility awareness-based methods; or

23 (x) Fertility education and medical management.

24 (b) All ~~An~~ accident and health insurance ~~companies~~ company doing
 25 business in this state shall include, as a covered expense, in vitro
 26 fertilization and restorative reproductive medicine.

27 ~~(b)(c) Pursuant to the applicable provisions of Under~~ the Arkansas
 28 Insurance Code, the Insurance Commissioner may suspend or revoke the
 29 certificate of authority of any insurance company failing to comply with ~~the~~
 30 ~~provisions of~~ this section.

31 ~~(e)(d)~~ After conducting appropriate studies and public hearings, the
 32 commissioner shall establish minimum and maximum levels of coverage to be
 33 provided by ~~the~~ an accident and health insurance ~~companies~~ company.

34 ~~(d)(e)~~ Coverage required under this section shall include services and
 35 procedures performed at a medical facility licensed or certified by the
 36 Department of Health or another state health department that conform to the

1 guidelines and minimum standards of the:

2 (1) American College of Obstetricians and Gynecologists for in
3 vitro fertilization clinics; ~~or~~

4 (2) American Society for Reproductive Medicine for programs of
5 in vitro fertilization; or

6 (3) Institute of Restorative Reproductive Medicine of America
7 for programs of restorative reproductive medicine.

8 ~~(e)~~(f) Continued certification shall require that the facility is
9 achieving a reasonable success rate with ~~both~~ fertilization, fertility, and
10 births.

11 ~~(f)~~(g) Appropriate laboratory facilities ~~must~~ shall be provided by the
12 entity requesting certification.

13

14 SECTION 4. Arkansas Code § 23-86-118 is amended to read as follows:

15 23-86-118. In vitro fertilization coverage required - Definitions.

16 (a) As used in this section:

17 (1)(A) "Fertility awareness-based methods" means modern,
18 evidence-based methods of tracking the menstrual cycle of a woman through
19 observable biological signs, including without limitation:

20 (i) Body temperature;

21 (ii) Cervical fluid; or

22 (iii) Hormone production in the reproductive system,
23 including luteinizing hormone and estrogen.

24 (B) "Fertility awareness-based methods" includes without
25 limitation:

26 (i) Fertility education and medical management;

27 (ii) The symptothermal method;

28 (iii) The Creighton Model FertilityCare System; or

29 (iv) The Billings Ovulation Method;

30 (2) "Fertility education and medical management" means a program
31 developed in collaboration with the Reproductive Health Research Institute
32 for medical research, protocols, and medical training for healthcare
33 professionals in order to enable the clinical application of research
34 advances in reproductive endocrinology by providing education for a woman
35 about her body and hormonal health and medical support, as appropriate;

36 (3) "Natural procreative technology" means an approach to

1 healthcare services that monitors and maintains a woman's reproductive and
 2 gynecological health, including without limitation laparoscopic gynecologic
 3 surgery to reconstruct the uterus, fallopian tubes, ovaries, and other organ
 4 structures, to eliminate endometriosis and other reproductive health
 5 conditions; and

6 (4)(A) "Restorative reproductive medicine" means any scientific
 7 approach to reproductive medicine that seeks to cooperate with or restore the
 8 normal physiology and anatomy of the human reproductive system without the
 9 use of methods that are suppressive, circumventive, or destructive to natural
 10 human functions.

11 (B) "Restorative reproductive medicine" includes without
 12 limitation:

13 (i) An ultrasound;

14 (ii) A blood test;

15 (iii) A hormone panel test;

16 (iv) A Laparoscopic or exploratory surgery;

17 (v) An examination of a patient's overall health and
 18 lifestyle;

19 (vi) Eliminating environmental endocrine disruptors;

20 (vii) Assessing the health and fertility of a

21 patient's partner;

22 (viii) Natural procreative technology;

23 (ix) Fertility awareness-based methods; or

24 (x) Fertility education and medical management.

25 (b) All ~~An~~ accident and health insurance ~~companies~~ company doing
 26 business in this state shall include, as a covered expense, in vitro
 27 fertilization and restorative reproductive medicine.

28 ~~(b)(c) Pursuant to the applicable provisions of~~ Under the Arkansas
 29 Insurance Code, the Insurance Commissioner may suspend or revoke the
 30 certificate of authority of any insurance company failing to comply with ~~the~~
 31 ~~provisions of~~ this section.

32 ~~(e)(d)~~ After conducting appropriate studies and public hearings, the
 33 commissioner shall establish minimum and maximum levels of coverage to be
 34 provided by ~~the~~ an accident and health insurance ~~companies~~ company.

35 ~~(d)(e)~~ Coverage required under this section shall include services
 36 performed at:

