1	State of Arkansas	As Engrossed: H1/16/25	
2	95th General Assembly	A Bill	
3	Regular Session, 2025		HOUSE BILL 1013
4			
5	Representatives Hudson, A. Co	ollins, D. Garner, Springer	
6			
7			
8		For An Act To Be Entitled	
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.	
14			
15			
16	Subtitle		
17	TO PR	COTECT FERTILITY TREATMENT RIGHTS	SIN
18	THIS	STATE.	
19			
20	BE IT ENACTED BY THE G	ENERAL ASSEMBLY OF THE STATE OF	ARKANSAS:
21			
22	SECTION 1. Arka	nsas Code Title 20, Chapter 9, i	s amended to add an
23	additional subchapter	to read as follows:	
24	Subcl	<u> hapter 16 — Fertility Treatment l</u>	<u>Rights</u>
25			
26	20-9-1601. Defi	nitions.	
27	As used in this	subchapter:	
28	<u>(1) "Fert</u>	ility treatment" means:	
29	<u>(A)</u>	Preservation of human oocytes,	sperm, or embryos for
30	later reproductive use	<u>.</u>	
31	<u>(B)</u>	Artificial insemination, includ	ing intravaginal
32	insemination, intracer	vical insemination, and intraute	rine insemination;
33	<u>(C)</u>	Assisted reproductive technology	y, including in vitro
34	fertilization and othe	r treatments or procedures in wh	ich reproductive
35	genetic material, such as oocytes, sperm, fertilized eggs, and embryos are		
36	handled, when clinically appropriate;		

I	(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.		
31			
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 $\underline{\text{in}}$		
10	accordance with widely accepted and evidence-based medical standards of care.		
11			
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.		
28			
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		

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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. 4 20-9-1606. Regulation of medicine. 5 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. 14 15 20-9-1607. Enforcement. (a) An individual or entity adversely affected by an alleged violation 16 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 healthcare provider, a healthcare insurer, or a manufacturer under this 21 22 subchapter. 23 (b) A healthcare provider may commence a civil action for relief on behalf of the healthcare provider, the healthcare provider's staff, or the 24 25 healthcare provider's patients who are or may be adversely affected by an alleged violation of this subchapter. 26 27 (c) In any action under this subchapter, the court may award appropriate equitable relief, including temporary, preliminary, or permanent 28 29 <u>injunctive</u> relief. (d)(l) In any action under this subchapter, the court shall award 30 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.

/s/Hudson