1	State of Arkansas	A D.11	
2	95th General Assembly	A Bill	
3	Regular Session, 2025		HOUSE BILL 1559
4			
5	By: Representative McGrew		
6	By: Senator J. Boyd		
7			
8	For An Act To Be Entitled		
9	AN ACT TO REQUIRE THE DEPARTMENT OF HUMAN SERVICES TO		
10	SEEK A WAIVER TO THE ARKANSAS MEDICAID PROGRAM FOR		
11	COVERAGE FOR INPATIENT TREATMENT SERVICES FOR		
12	SUBSTANCE USE	DISORDERS; AND FOR OTHER PURE	POSES.
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15		Subtitle	
16	TO REQUIR	RE THE DEPARTMENT OF HUMAN	
17	SERVICES	TO SEEK A WAIVER TO THE	
18	ARKANSAS	MEDICAID PROGRAM FOR COVERAGE	Е
19	FOR INPAT	CIENT TREATMENT SERVICES FOR	
20	SUBSTANCE	USE DISORDERS.	
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22	BE IT ENACTED BY THE GENER	AL ASSEMBLY OF THE STATE OF A	ARKANSAS:
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24	SECTION 1. Arkansas	Code Title 20, Chapter 77, S	Subchapter 1, is
25	amended to add an addition	al section to read as follows	s:
26	20-77-154. Inpatien	t treatment for substance use	<u>e disorder —</u>
27	Legislative findings.		
28	(a) The General Ass	embly finds that:	
29	(1) Substance	use disorder is a significar	nt public health
30	concern in this state;		
31	(2) Inpatient	treatment for substance use	disorders is an
32	essential component of comprehensive care;		
33	(3) Currently, inpatient treatment for substance use disorder is		
34	primarily funded through federal block grants; and		
35	(4) Expanding coverage in the Arkansas Medicaid Program for		
36	<u>inpatient treatment</u> for su	bstance use disorder could in	nprove access to care

1	and patient outcomes in this state.		
2	(b) The Department of Human Services shall:		
3	(1)(A) Develop and submit an application to the Centers of		
4	Medicare & Medicaid Services for a demonstration waiver under section 1115 of		
5	the Social Security Act, as in effect January 1, 2025, for exclusion of		
6	institutions for mental diseases for inpatient treatment services of		
7	substance use disorder within the program.		
8	(B) The application described in subdivision (b)(1)(A) of		
9	this section shall:		
10	(i) Allow coverage for inpatient treatment of		
11	substance use disorder in facilities that qualify as institutions for mental		
12	diseases;		
13	(ii) Expand access to medication-assisted treatment		
14	for opioid use disorder;		
15	(iii) Improve care coordination for beneficiaries		
16	with substance use disorder; and		
17	(iv) Develop intensive outpatient services designed		
18	to reduce the need for inpatient treatment services;		
19	(2) Consult with relevant stakeholders, including substance use		
20	disorder treatment providers, patient advocacy groups, and behavioral health		
21	experts in developing the waiver application described in subdivision		
22	(b)(1)(A) of this section;		
23	(3) Implement expanded coverage and services as authorized and		
24	approved by the Centers for Medicare & Medicaid Services; and		
25	(4) Report annually to the General Assembly on the status of the		
26	waiver application described under subdivision (b)(1)(A) of this section, the		
27	implementation progress, and outcomes of the expanded coverage.		
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