

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

# A Bill

HOUSE BILL 1858

4  
5 By: Representative Ladyman  
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## For An Act To Be Entitled

8  
9 AN ACT TO REQUIRE A PEDIATRICIAN TO SCREEN FOR TYPE 1  
10 DIABETES AT THE YEARLY WELL-CHILD VISIT; TO REQUIRE  
11 THAT THE ARKANSAS MEDICAID PROGRAM AND HEALTH BENEFIT  
12 PLANS COVER TYPE 1 DIABETES SCREENINGS; AND FOR OTHER  
13 PURPOSES.  
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## Subtitle

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17 TO REQUIRE A PEDIATRICIAN TO SCREEN FOR  
18 TYPE 1 DIABETES AT THE YEARLY WELL-CHILD  
19 VISIT; AND TO REQUIRE THAT THE ARKANSAS  
20 MEDICAID PROGRAM AND HEALTH BENEFIT  
21 PLANS COVER TYPE 1 DIABETES SCREENINGS.  
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23 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:  
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25 SECTION 1. Arkansas Code Title 20, Chapter 15, Subchapter 1, is  
26 amended to add an additional section to read as follows:

27 20-15-103. Screening for Type 1 diabetes – Legislative findings.

28 (a) The General Assembly finds that pediatricians do not regularly  
29 screen for Type 1 diabetes and often the diagnosis is only discovered due to  
30 an emergency hospitalization.

31 (b) A pediatrician shall screen for Type 1 diabetes during the yearly  
32 well-child visit beginning at three (3) years of age.

33 (c) The screening under subsection (b) of this section shall include a  
34 hemoglobin Alc testing, blood sugar testing, and further antibody testing if  
35 the pediatrician determines the antibody testing is necessary or if there is  
36 a family history of Type 1 diabetes.



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SECTION 2. Arkansas Code Title 20, Chapter 77, Subchapter 1, is amended to add an additional section to read as follows:

20-77-155. Screening for Type 1 diabetes.

(a) The Arkansas Medicaid Program shall cover screening for Type 1 diabetes under § 20-15-103.

(b) The Department of Human Services shall apply for any federal waiver, Medicaid state plan amendment, or other authorization necessary to implement this section.

SECTION 3. Arkansas Code Title 23, Chapter 79, Subchapter 1 is amended to add an additional section to read as follows:

23-79-170. Coverage of Type 1 diabetes screening – Definition.

(a)(1) As used in this section, “health benefit plan” means:

(A) An individual, blanket, or group plan, policy, or contract for healthcare services issued or delivered by an insurer, health maintenance organization, hospital medical service corporation, or self-insured governmental or church plan in this state; and

(B) Any health benefit program receiving state or federal appropriations from the State of Arkansas, including the Arkansas Medicaid Program and the Arkansas Health and Opportunity for Me Program, or any successor program.

(2) As used in this section, “health benefit plan” includes:

(A) An indemnity and managed care plan; and

(B) A nonfederal governmental plan as defined in 29 U.S.C. § 1002(32), as it existed on January 1, 2025.

(3) As used in this section, “health benefit plan” does not include:

(A) A disability income plan;

(B) A credit insurance plan;

(C) Insurance coverage issued as a supplement to liability insurance;

(D) Medical payments under an automobile or homeowner’s insurance plan;

(E) A health benefit plan provided under Arkansas Constitution, Article 5, § 32, the Workers’ Compensation Law, § 11-9-101 et

1 seq., or the Public Employee Workers' Compensation Act, § 21-5-601 et seq.;

2 (F) A plan that provides only indemnity for hospital  
3 confinement;

4 (G) An accident-only plan;

5 (H) A specified disease plan; or

6 (I) A long-term-care-only plan.

7 (b) A health benefit plan that is offered, issued, or renewed in this  
8 state shall provide coverage for Type 1 diabetes screening under § 20-15-103  
9 by a pediatrician on or after January 1, 2026.

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