

## HEALTH BENEFIT MANDATES IN ARKANSAS<sup>\*†</sup>

BENEFITS	TOTAL STATES WITH MANDATE <sup>‡</sup>	ESTIMATED COST
Alcoholism/Substance Abuse	46	1% to 3%
Ambulatory Surgery Centers	13	1% to 3%
Autism <sup>§</sup>	25	1% to 3%
Breast Reconstruction	50	<1%
Colorectal Cancer Screening	34	<1%
Contraceptives	29	1% to 3%
Dental Anesthesia	31	<1%
Diabetes Self-Management	38	<1%
Diabetic Supplies	47	<1%
Drug Abuse Treatment	34	<1%
Emergency Room Service	45	<1%
Hearing Aids for Minors	17	<1%
Hospice Care	12	<1%
In Vitro Fertilization	15	3% to 5%
Mammography Screening	50	<1%
Mastectomy	25	<1%
Maternity	22	1% to 3%
Maternity Minimum Stay	50	<1%
Mental Health General	42	1% to 3%
Mental Health Parity	48	5% to 10%
Newborn Sick Cell Anemia Testing	4	<1%
Off-Label Drug Use	36	<1%
Orthotics and/or Prosthetics	19	<1%
PKU/Metabolic Disorder	33	<1%
Prostate Cancer Screening	36	<1%
TMJ Disorder	19	<1%
Well Child Care	33	1% to 3%

As of January 1, 2012, Arkansas has 46 insurance mandates, 28 of which are benefit mandates.

<sup>\*</sup> Benefit mandates do not include mandates to cover particular providers or persons, only benefit mandates themselves.

<sup>†</sup> Estimates from *Health Insurance Mandates in the States, 2010*. Council for Affordable Health Insurance, [www.cahi.org](http://www.cahi.org).

<sup>‡</sup> The Council for Affordable Health Insurance's independent Actuarial Working Group on Mandated Benefits analyzes company data and provides cost-range estimates — less than 1 percent, 1-3 percent, 3-5 percent and 5-10 percent — to indicate the change in premium with the addition of a particular mandate. These estimates are based on actual health insurance company claims experience, not on theory or modeling.

<sup>§</sup> Act 196 of 2011 mandated coverage of applied behavioral therapy for autism disorders. The act contains a clause eliminating the mandate if it is not included as an essential health benefit for purposes of the Patient Protection and Affordable Care Act.