1	State of Arkansas	A Bill	
2	92nd General Assembly	A Dill	HOUSE DILL 1102
3	Regular Session, 2019		HOUSE BILL 1103
4	Dry Domesontative Sullivan		
5	By: Representative Sullivan		
6 7		For An Act To Be Entitled	
8	ΔΝ ΔΟΤ ΤΟ	REPEAL THE ARKANSAS HEALTHCARE TRANS	PARFNCY
9		E ACT OF 2015; TO REPEAL THE ARKANSAS	
10		E TRANSPARENCY INITIATIVE FUND; AND F	
11	OTHER PURI		010
12			
13			
14		Subtitle	
15	TO R	EPEAL THE ARKANSAS HEALTHCARE	
16	TRAN	SPARENCY INITIATIVE ACT OF 2015; AND	
17	TO R	EPEAL THE ARKANSAS HEALTHCARE	
18	TRAN	SPARENCY INITIATIVE FUND.	
19			
20			
21	BE IT ENACTED BY THE O	GENERAL ASSEMBLY OF THE STATE OF ARKA	NSAS:
22			
23	SECTION 1. Arka	ansas Code § 19-5-1145 is repealed.	
24	<del>19-5-1145. Arka</del>	<del>ansas Healtheare Transparency Initiat</del>	ive Fund.
25	<del>(a) There is e</del>	reated on the books of the Treasurer	<del>of State, the</del>
26	Auditor of State, and	the Chief Fiscal Officer of the State	e a trust fund to
27	be known as the "Arkar	<del>nsas Healtheare Transparency Initiati</del>	ve Fund".
28	(b)(1) The fund	d shall be an interest-bearing accoun	<del>t and may be</del>
29	invested in the manner	r permitted by law, with the interest	<del>-income a proper</del>
30	credit to the fund and	d which shall not revert to general re	e <del>venue, unless</del>
31	otherwise designated i	in law.	
32	<del>(2) The f</del>	fund shall be overseen by the State I	nsurance Department
33	and shall be used to p	pay all proper costs incurred in impl	e <del>menting the</del>
34	_	ansas Healtheare Transparency Initiat	ive Act of 2015, §
35	<del>23-61-901 et seq.</del>		
36	(c) The follows	ing moneys shall be paid into the fun-	<del>d:</del>

1	(1) Penalties imposed on submitting entities pursuant to the
2	Arkansas Healthcare Transparency Initiative Act of 2015, § 23-61-901 et seq.,
3	and rules promulgated under the Arkansas Healthcare Transparency Initiative
4	Act of 2015, § 23-61-901 et seq.;
5	(2) Appropriations from the General Assembly; and
6	(3) All other subscription fees or payments made by third
7	parties to the State Insurance Department for data access.
8	(d) Activities of the Arkansas Healthcare Transparency Initiative
9	Board and the availability of data as authorized in § 23-61-905(c)(1) are
10	contingent upon available funding.
11	
12	SECTION 2. Arkansas Code Title 23, Chapter 61, Subchapter 9, is
13	repealed.
14	Subchapter 9 — Arkansas Healtheare Transparency Initiative Act of 2015
15	
16	<del>23-61-901. Title.</del>
17	This subchapter shall be known and may be cited as the "Arkansas
18	Healthcare Transparency Initiative Act of 2015".
19	
20	23-61-902. Legislative intent and purpose.
21	(a) It is the intent of the General Assembly to create and maintain an
22	informative source of healthcare information to support consumers,
23	researchers, and policymakers in healthcare decisions within the state,
24	including decisions by the State Insurance Department to regulate the
25	business of insurance in this state.
26	(b) The purpose of this subchapter is to:
27	(1) Empower Arkansans to drive, deliver, and seek out value in
28	the healthcare system;
29	(2) Greate the Arkansas Healthcare Transparency Initiative;
30	(3) Establish governance of the Arkansas Healthcare Transparency
31	<del>Initiative;</del>
32	(4) Provide authority to collect healthcare information from
33	insurance carriers and other entities; and
34	(5) Establish appropriate methods for collecting, maintaining,
35	and reporting healthcare information, including privacy and security
36	<del>safeguards.</del>

1	
2	23-61-903. Definitions.
3	As used in this subchapter:
4	(1) "Arkansas Healthcare Transparency Initiative" means an
5	initiative to create a database, including ongoing all-payer claims database
6	projects funded through the State Insurance Department, that receives and
7	stores data from a submitting entity relating to medical, dental, and
8	pharmaceutical and other insurance claims information, unique identifiers,
9	and geographic and demographic information for covered individuals as
LO	permitted in this subchapter, and provider files, for the purposes of this
l 1	subchapter;
L2	(2) "Arkansas resident" means an individual for whom the
L3	submitting entity has identified an Arkansas address as the individual's
L4	primary place of residence;
L5	(3) "Claims data" means information included in an
16	institutional, professional, or pharmacy claim or equivalent information
L <b>7</b>	transaction for a covered individual, including the amount paid to a provider
18	of healthcare services plus any amount owed by the covered individual;
L <b>9</b>	(4) "Govered individual" means a natural person who is an
20	Arkansas resident and is eligible to receive medical, dental, or
21	pharmaceutical benefits under any policy, contract, certificate, evidence of
22	coverage, rider, binder, or endorsement that provides for or describes
23	coverage;
24	(5)(A) "Direct personal identifiers" means information relating
25	to a covered individual that contains primary or obvious identifiers, such as
26	the individual's name, street address, e-mail address, telephone number, and
27	Social Security number.
28	(B) "Direct personal identifiers" does not include
29	geographic or demographic information that would not allow the identification
30	of a covered individual;
31	(6) "Enrollment data" means demographic information and other
32	identifying information relating to covered individuals, including direct
33	personal identifiers;
34	(7) "Protected health information" means health information as
35	protected by the Health Insurance Portability and Accountability Act of 1996,
0.6	Pub I No 10/ 101 og it ovigted en January 1 2015.

1	(8) "Provider" means an individual or entity licensed by the
2	state to provide healthcare services;
3	(9)(A) "Submitting entity" means:
4	(i) An entity that provides health or dental
5	insurance or a health or dental benefit plan in the state, including without
6	limitation an insurance company, medical services plan, managed care
7	organization, hospital plan, hospital medical service corporation, health
8	maintenance organization, or fraternal benefit society, provided that the
9	entity has covered individuals and the entity had at least two thousand
10	(2,000) covered individuals in the previous calendar year;
11	(ii) A health benefit plan offered or administered
12	by or on behalf of the state or an agency or instrumentality of the state,
13	including without limitation benefits administered by a managed care
14	organization whether or not the managed care organization had two thousand
15	(2,000) covered individuals in the previous year;
16	(iii) A health benefit plan offered or administered
17	by or on behalf of the federal government with the agreement of the federal
18	government;
19	(iv) The Workers' Compensation Commission;
20	(v) Any other entity providing a plan of health
21	insurance or health benefits subject to state insurance regulation, a third-
22	party administrator, or a pharmacy benefits manager, provided that the entity
23	has covered individuals and the entity had at least two thousand (2,000)
24	covered individuals in the previous calendar year;
25	(vi) A health benefit plan subject to the Employee
26	Retirement Income Security Act of 1974, Pub. L. No. 93-406, and that is fully
27	insured;
28	(vii) A risk-based provider organization licensed by
29	the State Insurance Department; and
30	(viii) An entity that contracts with institutions of
31	the Department of Correction or the Department of Community Correction to
32	provide medical, dental, or pharmaceutical care to inmates.
33	(B) "Submitting entity" does not include:
34	(i) An entity that provides health insurance or a
35	health benefit plan that is accident only, specified disease, hospital
36	indomnity long-term care disability income or other supplemental benefit

1	coverage;
2	(ii) An employee of a welfare benefit plan as
3	defined by federal law that is also a trust established pursuant to
4	collective bargaining subject to the Labor Management Relations Act, 1947,
5	Pub. L. No. 80-101; or
6	(iii) A health benefit plan subject to the Employee
7	Retirement Income Security Act of 1974, Pub. L. No. 93-406, that is self-
8	funded; and
9	(10) "Unique identifier" means any identifier that is guaranteed
10	to be unique among all identifiers for covered individuals but does not
11	include direct personal identifiers.
12	
13	23-61-904. Arkansas Healtheare Transparency Initiative.
14	(a) The Arkansas Healtheare Transparency Initiative is established
15	with the purpose to create a database, including ongoing all-payer claims
16	database projects funded through the State Insurance Department, that
17	receives and stores data from a submitting entity relating to medical,
18	dental, and pharmaceutical and other insurance claims information, unique
19	identifiers, and geographic and demographic information for covered
20	individuals as permitted in this subchapter, and provider files, for the
21	<del>purposes of this subchapter.</del>
22	(b) The Arkansas Healtheare Transparency Initiative shall be governed
23	by the department and advised by the Arkansas Healthcare Transparency
24	Initiative Board.
25	
26	23-61-905. Arkansas Healtheare Transparency Initiative Board
27	Membership — Duties.
28	(a)(1) There is created the Arkansas Healtheare Transparency
29	Initiative Board, which shall be composed of the following members:
30	(A) A representative of the Department of Human Services;
31	(B) A representative of the Department of Health;
32	(C) A representative of the Office of Health Information
33	Technology or its successor entity as provided by state law;
34	(D) The Surgeon General;
35	(E) Nine (9) members appointed by the Governor as follows:
36	(i) Two (2) representatives from the health

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1
    insurance industry, one (1) of whom shall be a multistate representative and
 2
    one (1) of whom shall be a domestic representative;
 3
                            (ii) Two (2) representatives from the healthcare
 4
    provider community;
 5
                             (iii) A representative from a self-insured employer;
 6
                             (iv) A representative from an employer of fewer than
 7
    one hundred (100) full-time employees that provides healthcare coverage to
    employees through a fully-insured product;
8
9
                             (v) A representative from a healthcare consumer
10
    organization;
11
                             (vi) A representative from the academic research
12
    community with expertise in healthcare claims data analysis; and
13
                             (vii) A representative with expertise in health data
14
    privacy and security; and
15
                       (F) A representative from the Arkansas Biosciences
16
    Institute who shall serve as an ex-office, nonvoting member.
17
                 (2) A Covernor-appointed member of the board in subdivision
18
    (a)(1)(E) of this section shall serve for a term of three (3) years.
19
                 (3) The board shall appoint one (1) member as Chair of the
20
    Arkansas Healthcare Transparency Initiative Board and determine the
     qualifications, duties, and the term of office of the chair.
21
22
                 (4) Seven (7) members present constitute a quorum.
23
                 (5) The board shall hold its first meeting no later than July 1,
24
    2015.
25
          (b) The State Insurance Department shall:
26
                 (1) Have the authority to:
27
                       (A) Collect, validate, analyze, and present health data,
28
    including claims data;
29
                       (B) Assess penalties for noncompliance with this
30
    subchapter; and
31
                       (C) Establish and convene additional subcommittees to
32
    carry out the purposes of this subchapter;
33
                 (2) Designate the Arkansas Center for Health Improvement as the
34
    Administrator of the Arkansas Healtheare Transparency Initiative, which shall
    be responsible for development and implementation of a sustainability plan
35
36
    subject to data use and disclosure requirements of this subchapter and any
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1	rules promulgated under this subchapter;
2	(3) With the assistance of the Administrator of the Arkansas
3	Healthcare Transparency Initiative, establish and convene the following
4	subcommittees:
5	(A) The Data Oversight Subcommittee of the Arkansas
6	Healthcare Transparency Initiative, which shall:
7	(i) Consist of:
8	(a) Three (3) Governor-appointed board
9	members; and
10	(b) One (1) individual healthcare consumer;
11	<del>and</del>
12	(ii) Review and make recommendations to the State
13	Insurance Department regarding:
14	(a) Data requests for consistency with the
15	intent and purpose of this subchapter, including whether the data request
16	contains the minimum required information; and
17	(b) Reports and publications generated from
18	data requests to ensure compliance with this subchapter; and
19	(B) The Scientific Advisory Subcommittee of the Arkansas
20	Healthcare Transparency Initiative, which shall:
21	(i) Consist of:
22	(a) The Governor-appointed member of the board
23	from the academic research community; and
24	(b) Two (2) nonmembers of the board who are
25	academic researchers; and
26	(ii) Serve as peer review for academic researchers
27	and provide advice regarding data requests for academic proposals and the
28	scientific rigor of analytic work; and
29	(4) Adopt any rules necessary to implement this subchapter under
30	the Arkansas Administrative Procedure Act, § 25-15-201 et seq.
31	(c) In consultation with the board, the State Insurance Department
32	shall exercise its powers and duties under this subchapter to:
33	(1) Establish policies and procedures necessary for the
34	administration and oversight of the Arkansas Healthcare Transparency
35	Initiative, including procedures for the collection, processing, storage,
26	analyzaia was and malagas of data.

-	(2) Identity and emplote the Ney heartmeare issues, questions,
2	and problems that may be improved through more transparent information,
3	including without limitation data required to be disclosed to patients
4	related to provider relationships or affiliations with payers and providers,
5	financial interests in healthcare businesses, and payments or items of any
6	value given to providers from pharmaceutical or medical device manufacturers
7	or agents thereof; and
8	(3) Provide a biennial report to the General Assembly on the
9	operations of the Arkansas Healtheare Transparency Initiative.
10	
11	23-61-906. Data submission.
12	(a) Except as provided in subsection (d) of this section, no later
13	than January 1, 2016, and every quarter thereafter, a submitting entity shall
14	submit health and dental claims data, unique identifiers, and geographic and
15	demographic information for covered individuals as permitted in this
16	subchapter, and provider files to the Arkansas Healthcare Transparency
17	Initiative in accordance with standards and procedures adopted by the State
18	Insurance Department.
19	(b) Data submitted under this subchapter shall be treated as
20	confidential and are exempt from disclosure under the Freedom of Information
21	Act of 1967, § 25-19-101 et seq., and are not subject to subpoena, except to
22	the extent provided in § 23-61-205.
23	(c) The collection, storage, and release of data and other information
24	under this section is subject to applicable state and federal data privacy
25	and security law.
26	(d) No later than July 1, 2015, a submitting entity shall submit
27	health and dental claims data, unique identifiers, and geographic and
28	demographic information for covered individuals as permitted in this
29	subchapter to the Arkansas Healthcare Transparency Initiative to support
30	deliberations of the Arkansas Health Reform Legislative Task Force.
31	
32	<del>23-61-907. Data release.</del>
33	(a) Data in the Arkansas Healthcare Transparency Initiative shall:
34	(1) To the extent authorized by the State Insurance Department,
35	<del>be available:</del>
36	(A) When disclosed in a form and manner that ensures the

1	privacy and security or protected hearth information as required by state and
2	federal laws, as a resource to insurers, employers, purchasers of health
3	care, researchers, state agencies, and healthcare providers to allow for
4	assessment of healthcare utilization, expenditures, and performance in this
5	state, including without limitation as a resource for hospital community
6	health needs assessments; and
7	(B) To state programs regarding healthcare quality and
8	costs for use in improving health care in the state, subject to rules
9	prescribed by the department conforming to state and federal privacy laws or
10	limiting access to limited-use data sets; and
11	(2) Not be used to:
12	(A) Disclose trade secrets of submitting entities;
13	(B) Reidentify or attempt to reidentify an individual who
14	is the subject of any submitted data without obtaining the individual's
15	eonsent; or
16	(C) Create or augment data contained in a national claims
17	<del>database.</del>
18	(b) Notwithstanding the Health Insurance Portability and
19	Accountability Act of 1996, Pub. L. No. 104-191, or any other provision of
20	law, the Arkansas Healthcare Transparency Initiative shall not publicly
21	disclose any data that contains direct personal identifiers.
22	
23	23-61-908. Penalties for failure to submit data.
24	(a) Except for state or federal agencies that are submitting entities,
25	a submitting entity that fails to submit data as required by this subchapter
26	or the rules of the State Insurance Department may be subject to a penalty.
27	(b) The department shall adopt a schedule of penalties not to exceed
28	one thousand dollars (\$1,000) per day of violation, determined by the
29	severity of the violation.
30	(c) A penalty imposed under this section may be remitted or mitigated
31	upon such terms and conditions as the department considers proper and
32	consistent with the public health and safety.
33	(d) A penalty remitted under this section shall be used for Arkansas
34	Healthcare Transparency Initiative operations.
35	

23-61-909. Data collected under State Health Data Clearinghouse Act.

36

1	(a) The Department of Health shall submit data collected under the
2	State Health Data Clearinghouse Act, § 20-7-301 et seq., to the Arkansas
3	Healthcare Transparency Initiative for integration into the Arkansas
4	Healthcare Transparency Initiative database created under § 23-61-904.
5	(b) The data submitted under subsection (a) of this section:
6	(1) Shall be assigned a unique identifier as defined in § 23-61-
7	903; and
8	(2) May be used in accordance with the purposes of the Arkansas
9	Healthcare Transparency Initiative and the rules promulgated under this
10	subchapter.
11	
12	23-61-910. Data collected regarding hospital discharge and emergency
13	department records.
14	(a) The Department of Health shall submit data collected regarding
15	hospital discharge and emergency department records for the uninsured, birth
16	and death records, and disease registry data under the State Health Data
17	Clearinghouse Act, § 20-7-301 et seq., § 20-15-201 et seq., and § 20-18-201,
18	to the Arkansas Healthcare Transparency Initiative Board for integration into
19	the Arkansas Healthcare Transparency Initiative database created under § 23-
20	<del>61-904.</del>
21	(b) The data submitted under subsection (a) of this section:
22	(1) Shall be assigned a unique identifier as defined in § 23-61-
23	903; and
24	(2) May be used in accordance with the purposes of the Arkansas
25	Healthcare Transparency Initiative and the rules promulgated under this
26	subchapter.
27	
28	SECTION 3. Arkansas Code $\S 23-61-1004(g)(2)(B)$ , concerning the
29	administration of the Arkansas Works Program, is amended to read as follows:
30	(B) A health insurer may utilize existing mechanisms with
31	supplemental enrollment information to fulfill requirements under this
32	subchapter, including without limitation the state's all-payer claims
33	database established under the Arkansas Healthcare Transparency Initiative
34	Act of 2015, $\S$ 23-61-901 et seq., for claims and enrollment data submission.
35	
36	