Arkansas

Sources of Insurance Coverage

*Source: KFF, Health Insurance Coverage of the Total Population, 2022

**Medicare**

In Arkansas, **476,400** residents are enrolled in Medicare, 16.1% of the state’s population (2022 data). Of those, **44%** are enrolled in a Medicare Advantage plan. For residents in the traditional Medicare program, the Arkansas Insurance Department (AID) licenses Medicare supplemental plans. A list of companies marketing Medicare supplemental policies in Arkansas is available [here](#).

**Medicaid and the Children’s Health Insurance Program (CHIP)**

In Arkansas, **810,200 people** are enrolled in Medicaid or CHIP, 27.4% of the population (2022 data). Depending on an individual’s eligibility status, Medicaid benefits are provided directly through the state (Medicaid Fee-For-Service) or via private qualified health plans (QHPs) offered via the health insurance Marketplace. Arkansas adopted Medicaid expansion under the Affordable Care Act, which the state calls the “ARHOME” program. It currently covers almost **343,000** low-income adults who enroll through QHPs.

Arkansas Medicaid covers children up to 216% of the federal poverty level (FPL). Approximately **40%** of all births in Arkansas are covered by Medicaid.
In Arkansas, the CHIP program is called “ARKids” and is jointly funded and operated by the state and federal government. Medicaid covers infants up to 147% FPL and ARKids fills in for children in households up to 216% FPL. Arkansas’s Department of Human Services manages the Medicaid and CHIP programs.

**Employer-sponsored Insurance**

In Arkansas, 1.21 million people are covered by employer-sponsored insurance (ESI), or 41.1% of the total state population (2022 data). Approximately 47.5% of Arkansas employers offer ESI. However, offer rates vary significantly by size of firm. In Arkansas, 97.2% of large firms (50 or more employees) offer ESI, while only 36.3% of small employers offer ESI.

In Arkansas, approximately 39.8% of private sector businesses that offer health insurance self-fund at least one health plan. For large firms (50 or more employees) that offer health insurance, 50.5% self-fund at least one health plan.

**Individual Market Insurance**

Approximately 5.5% of Arkansas residents are enrolled in the individual market (2022 data). In 2023, 100,407 Arkansas residents selected a plan through the Affordable Care Act Marketplace, which in Arkansas is operated by the state, but uses the federal government’s eligibility and enrollment platform, HealthCare.gov. It is more challenging to ascertain enrollment numbers for off-Marketplace individual market enrollment.

**Other Coverage**

Some Arkansans are enrolled in other forms of insurance coverage, such as coverage for the military (TRICARE or U.S. Veterans Administration), which covers 1.3%, or 39,300 residents.

**The Uninsured**

Approximately 8.5%, or 251,300 Arkansas residents are uninsured (2022 data). Arkansas has the 29th highest uninsured rate in the country. Among the non-elderly, people of color are significantly more likely to be uninsured in Arkansas than White people. Hispanic residents have the highest uninsured rate (25.3%), followed by American Indians (18.3%), Asian/Native Hawaiian and Pacific Islander (14.0%), and Black Arkansans (9.3%). White residents have the lowest uninsured rate (7.8%) among all racial groups. Lack of insurance is also highly correlated with income. Approximately 13.0% of people under 100% FPL are the uninsured in Arkansas, while just 3.8% of people over 400% FPL are uninsured.

**State Regulators: Arkansas**

CMS is responsible for the oversight of Medicare Advantage plans. The CMS Regional Office for Arkansas is based in Dallas. Media inquiries may be submitted here.

Arkansas Insurance Department (AID) AID regulates the business of insurance in the state of Arkansas. For health insurance companies, AID is responsible for:
- **Licensure**: All insurers operating in the state must demonstrate that they are financially solvent and capable of paying claims. After initial licensure, companies must file financial information with AID on a regular basis.
- **Form review**: AID reviews health insurers’ contracts and covered benefits to ensure that they comport with state and federal law, including state benefit mandates and network adequacy standards.
- **Rate review**: Health insurers offering plans to individuals and small employers (with fewer than 50 employees) must submit proposed premium rates to AID, and the agency has authority to review and require adjustments before rates can be used. Information about insurers’ proposed rates is available here.
- **Marketing**: AID is responsible for oversight of insurers’ marketing tactics and discouraging unfair or deceptive tactics. The agency also licenses and conducts oversight of insurance agents, brokers, and assisters.
- **Enforcement**: AID has authority to enforce state and federal insurance laws through the Consumer Services Division. Enforcement tools can range from requesting a corrective action, issuing a cease and desist order, or imposing fines and the results of company market conduct examinations are summarized in annual reports. Consumers or providers can file complaints against insurers here.
- **Appeals**: Under the ACA, insurers must provide enrollees with an internal review of adverse benefit decisions and the right to an external, independent appeal. AID operates Arkansas’s external review system, and provides information to enrollees seeking an appeal here.

AID produces annual reports on insurance company market share and revenue from premiums.

**Arkansas Department of Human Services (DHS)**
Arkansas Medicaid, which is operated by the Arkansas Department of Human Services (DHS), runs the state’s Medicaid and CHIP programs.

**ARHOME** is the state’s Medicaid expansion program that offers eligible Arkansans private health insurance coverage through QHPs.

A variety of publicly available documents related to the state’s Medicaid program including fee schedules and benefit information can be found here.

**Attorney General of Arkansas**
The Attorney General of Arkansas represents the state in court when there is an action against an insurance company, entity, or individuals engaged in potentially fraudulent activity. The Attorney General’s Consumer Protection Division responds to consumer complaints about unfair and misleading practices by health insurance companies and their agents and brokers. Consumer complaints can be submitted here.
Other Sources of Information

Health Insurance Navigators, Agents and Brokers (collectively, “consumer assisters”) Arkansas’s health insurance marketplace (AHIM) provides grants to local organizations called “Assisters” that are tasked with helping consumers determine eligibility for subsidized coverage programs and with post-enrollment questions. Arkansas-based health insurance agents and brokers perform similar consumer assistance functions, and are generally paid on a commission basis. These consumer assisters can be helpful sources of information about health insurance and the challenges consumers face. They can be located through the “Find Help” search portal and through the HelpLine at 1-844-355-3262.