

2024 Regular Session

HOUSE BILL NO. 508

BY REPRESENTATIVE BAGLEY

INSURANCE/HEALTH: Provides relative to medical and surgical treatments of cancer

1 AN ACT

2 To enact R.S. 22:1077.3, relative to health insurance coverage; to require coverage for a
3 patient's choice of medical and surgical treatments following a diagnosis of cancer;
4 to provide for definitions; and to provide for related matters.

5 Be it enacted by the Legislature of Louisiana:

6 Section 1. R.S. 22:1077.3 is hereby enacted to read as follows:

7 §1077.3. Required coverage for a patient's choice of medical and surgical treatments
8 following a diagnosis and treatment of cancer

9 A. The purpose of this Section is to stress that decisions regarding the
10 treatment procedures to be performed following a diagnosis of cancer shall be made
11 solely by the patient in consultation with attending physicians, and to clarify that all
12 levels of medical and surgical treatment as provided for in this Section are medically
13 necessary and shall not be excluded from coverage. Consulting physicians shall
14 consider recognized, evidence-based standards such as the guidelines of the National
15 Comprehensive Cancer Network in making treatment recommendations.

16 B.(1) Any health benefit plan offered by a health insurance issuer that
17 provides medical and surgical benefits with respect to treatment for cancer shall
18 provide coverage for the medical and surgical treatment corresponding to urinary and
19 sexual dysfunction resulting from the treatments, chosen by a patient diagnosed with
20 cancer in consultation with the attending physician.

1 (2) A health benefit plan offered by a health insurance issuer that provides
2 medical and surgical benefits with respect to cancer treatment shall not deny
3 coverage for those procedures correcting urinary and sexual dysfunction resulting
4 from treatments, including penile injections, external pumps, and surgical implants,
5 as chosen by a patient diagnosed with and treated for cancer in consultation with the
6 attending physician.

7 C. For purposes of this Section, the following terms have the following
8 meanings:

9 (1) "Health benefit plan" means any hospital, health, or medical expense
10 insurance policy, hospital or medical service contract, employee welfare benefit plan,
11 contract, or other agreement with a health maintenance organization or a preferred
12 provider organization, health and accident insurance policy, or any other insurance
13 contract of this type in this state, including a group insurance plan and the Office of
14 Group Benefits programs. "Health benefit plan" does not include a plan providing
15 coverage for excepted benefits as defined in R.S. 22:1061, limited benefit health
16 insurance plans, and short-term policies that have a term of less than twelve months.

17 (2) "Health insurance issuer" means an entity subject to the insurance laws
18 and regulations of this state, or subject to the jurisdiction of the commissioner, that
19 contracts or offers to contract to provide, deliver, arrange for, pay for, or reimburse
20 any of the costs of healthcare services, including through a health benefit plan as
21 defined in this Section, and includes a sickness and accident insurance company, a
22 health maintenance organization, a preferred provider organization, or any similar
23 entity, or any other entity providing a plan of health insurance or health benefits.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 508 Engrossed

2024 Regular Session

Bagley

Abstract: Requires coverage for a patient's choice of medical and surgical treatment following a diagnosis of cancer.

Proposed law provides that decisions regarding treatment procedures performed following a diagnosis of cancer are to be made solely by the patient in consultation with attending physicians. Requires consulting physicians to consider recognized, evidence-based standards, such as those of the National Comprehensive Cancer Network.

Proposed law clarifies that all levels of medical and surgical treatment are medically necessary and prohibits such treatment from coverage exclusion.

Proposed law requires a health benefit plan offered by a health insurance issuer that provides medical and surgical benefits for cancer treatments to cover the medical and surgical treatments corresponding to urinary and sexual dysfunction resulting from treatments that have been chosen by a patient diagnosed with cancer. Further prohibits denial of coverage for procedures correcting urinary and sexual dysfunction resulting from treatments, including penile injections, external pumps, and surgical implants, as chosen by a patient in consultation with the attending physician.

Proposed law defines "health benefit plan" and "health insurance issuer".

(Adds R.S. 22:1077.3)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance to the original bill:

1. Amend the definition of "health benefit plan" to exclude a "self-insurance plan".