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SENATE BILL NO. 122

BY SENATORS CARTER, BARROW AND CLOUD

AN ACT
To amend and reenact R.S. 42:808(F), relative to the Office of Group Benefits; to provid
for the coverage of certain dependents; to provide for notice to certain parents and
grandparents; to provide for the right to appeal to an appeal review panel in certai
circumstances; to provide relative to the authority of appeal review panels; and t
provide for related matters.
Be it enacted by the Legislature of Louisiana:
Section 1. R.S. 42:808(F) is hereby amended and reenacted to read as follows:
§808. Eligibility in group programs
* * *
F (1) Attainment of the respective limiting age of a child or grandchild sha

F.(1) Attainment of the respective limiting age of a child or grandchild shall not operate to terminate the coverage of such child or grandchild if the child or grandchild became incapable of self-sustaining employment by reason of physical or mental disability prior to attaining the respective limiting age, provided that no <u>later than seven months</u> before the child or grandchild reaches the limiting age, <u>the</u> health plan authorized by R.S. 42:851(A) shall send a notice notifying the parent or grandparent that the coverage shall expire unless but no earlier than six months prior thereto, an application for continued coverage is filed with the office on a form designated by the office, and the application is subsequently approved. The notice shall provide that if the application for continued coverage is not filed prior to the date the child or grandchild reaches the respective limiting age, the child or grandchild shall lose coverage. The notice shall explain the right of the parent or grandparent to appeal for an administrative review if the documentation is not submitted timely. This application shall be submitted no earlier than six months prior to the child or grandchild attaining the respective limiting age and shall be accompanied by an attestation from the dependent's attending physician setting forth the specific physical or mental disability and

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certifying that the child or grandchild is incapable of self-sustaining employment by

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2 reason of that disability. The office may require additional medical or other 3 supporting documentation regarding the disability to process the application. 4 (2) After the initial approval, the office may require the submission of additional medical or other supporting documentation substantiating the continuance 5 of the disability, but not more frequently than annually, as a precondition to 6 7 continued coverage. If continued coverage is denied due to the failure of the parent or grandparent to obtain the additional documentation, upon submitting 8 9 the documentation, the parent or grandparent may appeal for an administrative 10 review to reinstate the coverage. For good cause shown and after considering the totality of the circumstances, the administrative review panel may decide to 11 12 reinstate coverage for the child or grandchild. 13 (3) The parent or grandparent who fails to submit the application for 14 continued coverage prior to the date the child or grandchild reaches the 15 respective limiting age, may appeal for an administrative review of the denial 16 of coverage. The parent or grandparent shall explain the reasons for the 17 untimely filing. For good cause shown and after considering the totality of the 18 circumstances, the administrative review panel may decide to continue coverage 19 for the child or grandchild. 20 (4) The provisions of this Subsection shall apply to any health plan authorized by R.S. 42:851(A). 21 22 Section 2. This Act may be referred to and may be cited as "Arielle's Law". PRESIDENT OF THE SENATE SPEAKER OF THE HOUSE OF REPRESENTATIVES GOVERNOR OF THE STATE OF LOUISIANA APPROVED: ____