

SENATE BILL NO. 204

BY SENATOR TALBOT AND REPRESENTATIVES ADAMS, AMEDEE, BAGLEY, BROWN, CARRIER, GARY CARTER, WILFORD CARTER, COX, CREWS, DESHOTEL, DUBUISSON, EDMONSTON, FIRMENT, FREEMAN, FREIBERG, FRIEMAN, GREEN, HARRIS, HENRY, HOLLIS, ILLG, JAMES, JONES, JORDAN, LACOMBE, LYONS, MACK, MCCORMICK, MIGUEZ, DUSTIN MILLER, MINCEY, CHARLES OWEN, PIERRE, PRESSLY, SCHEXNAYDER, SEABAUGH, SELDERS, STAGNI, STEFANSKI, THOMPSON, VILLIO, WHITE, WILLARD AND WRIGHT

1 AN ACT

2 To amend and reenact R.S. 22:1044(E)(2) and to enact R.S. 22:1054.1, relative to health
3 insurance coverage for cancer treatments; to provide relative to participation in a
4 clinical trial; to require health insurance coverage for a treatment provided or study
5 conducted in a Phase I clinical trial for cancer; to prohibit denial of coverage in
6 certain circumstances; to require coverage of prescription drugs that target a specific
7 mutation for a minimum initial period; to require a physician's certification for
8 continued coverage; to provide for applicability; to provide for an effective date; and
9 to provide for related matters.

10 Be it enacted by the Legislature of Louisiana:

11 Section 1. R.S. 22:1044(E)(2) is hereby amended and reenacted and R.S. 22:1054.1
12 is hereby enacted to read as follows:

13 §1044. Health coverage; participants in clinical trials

14 * * *

15 E. Costs of investigational treatments and costs of associated
16 protocol-related patient care shall be covered if all of the following criteria are met:

17 * * *

18 (2)(a) The treatment is being provided or the studies are being conducted in
19 a **Phase I**, Phase II, Phase III, or Phase IV clinical trial for cancer.

20 **(b) Nothing in this Section shall require a health insurance issuer**
21 **offering any health insurance coverage to provide coverage for the following:**

1 (i) Non-healthcare services provided as part of the clinical trial.

2 (ii) Costs for managing research data associated with the clinical trial.

3 (iii) Investigational drugs, devices, items, or services associated with the
 4 clinical trial.

5 * * *

6 §1054.1. Requirement for coverage of cancer treatment targeting a specific
 7 genetic mutation

8 A. No health coverage plan delivered or issued for delivery in this state
 9 shall deny coverage for the treatment of metastatic or unresectable tumors with
 10 a medically necessary drug prescribed by a physician on the sole basis that the
 11 drug is not indicated for the location in the body of the patient's cancer if the
 12 drug is approved by the United States Food and Drug Administration for the
 13 treatment of the specific mutation of the patient's cancer. Such coverage may
 14 be denied if an alternative treatment has proven to be more effective in
 15 published randomized clinical trials and is not contraindicated in the patient.

16 B.(1) Any health coverage plan delivered or issued for delivery in this
 17 state shall include coverage for a minimum initial treatment period of not less
 18 than three months for a medically necessary drug prescribed by a physician
 19 that is not indicated for the location in the body of the patient's cancer if the
 20 drug is approved by the United States Food and Drug Administration for the
 21 treatment of the specific mutation of the patient's cancer.

22 (2) The health coverage plan shall continue to provide coverage of the
 23 prescribed drug after the initial treatment period provided for in Paragraph (1)
 24 of this Subsection if the treating physician certifies that the prescribed drug is
 25 medically necessary for the treatment of the patient's cancer based on
 26 documented improvement of the patient.

27 C. For purposes of this Section, "health coverage plan" means any
 28 hospital, health, or medical expense insurance policy, hospital or medical
 29 service contract, employee welfare benefit plan, contract, or other agreement
 30 with a health maintenance organization or a preferred provider organization,

1 health and accident insurance policy, or any other insurance contract of this
 2 type in this state, including a group insurance plan, a self-insurance plan, and
 3 the Office of Group Benefits programs. "Health coverage plan" shall not
 4 include a plan providing coverage for excepted benefits as defined in R.S.
 5 22:1061, limited benefit health insurance plans, and short-term policies that
 6 have a term of less than twelve months.

7 Section 2.(A) This Act shall become effective on January 1, 2021.

8 (B) This Act shall apply to any new policy, contract, program, or health coverage
 9 plan issued on and after January 1, 2021. Any policy, contract, or health coverage plan in
 10 effect prior to January 1, 2021, shall convert to conform to the provisions of this Act on or
 11 before the renewal date, but no later than January 1, 2022.

 PRESIDENT OF THE SENATE

 SPEAKER OF THE HOUSE OF REPRESENTATIVES

 GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____