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## 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)]

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Kleckley

HB No. 821

**Abstract:** Authorizes health insurance issuers to offer voluntary wellness or health improvement programs that allow for rewards or incentives for insureds or enrollees.

Proposed law authorizes a health insurance issuer to offer a voluntary wellness or health improvement program that allows for rewards or incentives including but not limited to merchandise, gift cards, debit cards, premium discounts or rebates, contributions towards a member's health savings account, modifications to copayment, deductible, or coinsurance amounts, or any combination of these incentives to encourage participation or to reward for participation in the program.

Proposed law further provides that any such reward or incentive shall not violate present law relative to unfair trade practices in the business of insurance if disclosed in the policy or certificate of authority of the health insurance issuer and filed with the Department of Insurance in accordance with existing state requirements.

Proposed law also provides that the insured or enrollee may be required to provide verification, such as a statement from his physician, that a medical condition makes it unreasonably difficult or medically inadvisable for the individual to participate in the wellness or health improvement program.

Proposed law provides that nothing in proposed law shall prohibit health insurance issuers from offering incentives or rewards to members for adherence to wellness or health improvement programs if otherwise allowed by state or federal law.

Proposed law defines a "health insurance issuer" as any entity that offers health insurance coverage through a policy or certificate of insurance subject to state law that regulates the business of insurance, including health maintenance organizations, certain nonfederal government plans, and the Office of Group Benefits.

Effective upon signature of governor or lapse of time for gubernatorial action.

(Adds R.S. 22:1016)