The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Beth O'Quin.

DIGEST

SB 48 Original

2024 Regular Session

Talbot

<u>Proposed law</u> requires any health coverage plan renewed, delivered, or issued for delivery in this state to include coverage for biomarker testing for the purpose of the diagnosis, treatment, appropriate management, or ongoing monitoring of an individual's disease or condition when the test provides clinical utility as demonstrated by medical and scientific evidence, including any one of the following:

- (1) Labeled indications for diagnostic tests approved or cleared by the U.S. Food and Drug Administration (FDA) or indicated diagnostic tests for a drug approved by the FDA.
- (2) Warnings and precautions listed on a FDA-approved drug label.
- (3) National Coverage Determinations of the Centers for Medicare and Medicaid Services or Local Coverage Determinations of Medicare Administrative Contractors.
- (4) Nationally recognized clinical practice guidelines.

<u>Proposed law</u> retains <u>present law</u> but adds consensus states when the test provides clinical utility as demonstrated by medical and scientific evidence.

<u>Present law</u> defines "biomarker", "biomarker testing", "clinical utility", "health coverage plan", and "nationally recognized clinical practice guidelines".

<u>Proposed law</u> retains <u>present law</u> but adds a definition for "consensus statements" to mean statements developed by an independent, multidisciplinary panel of experts that utilize a transparent methodology and reporting structure and provides for a conflict-of-interest policy. Provides these statements are aimed at specific clinical circumstances and based on the best available evidence for the purpose of optimizing the outcomes of clinical care.

Present law requires implementation of present law under certain circumstances.

Proposed law repeals present law.

<u>Present law</u> provides <u>present law</u> is effective upon the signature of the governor or lapse of time for gubernatorial action.

Proposed law retains present law but makes a technical change.

<u>Proposed law</u> provides that the commissioner of insurance (commissioner) may issue penalties or cease and desist orders if he determines that any health insurance issuer is not in compliance with

proposed law.

Proposed law provides monetary penalties for violations of cease and desist orders.

<u>Proposed law</u> authorizes the commissioner to revoke, suspend, or nonrenew a certificate of authority of any health insurance issuer for noncompliance. <u>Proposed law</u> permits any aggrieved health insurance issuer the opportunity to seek judicial review of certain decisions by the commissioner.

<u>Proposed law</u> applies to any new policy, contract, program, or health coverage plan issued on or after Jan. 1, 2025 and requires any policy, contract, or health coverage plan in effect prior to Jan. 1, 2025, shall convert to conform to the provisions of this Act on or before the renewal date, but no later than Jan. 1, 2026.

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

(Amends Section 3 of Act No. 324 of 2023 RS; adds R.S. 22:1028.5(B)(2)(e), (E)(6), and (F)-(I))