## **DIGEST**

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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.

<u>Proposed law</u> 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.

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

<u>Proposed law</u> 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".