

2025 Regular Session

SENATE BILL NO. 42

BY SENATORS SELDERS, BARROW, DUPLESSIS, FOIL, TALBOT AND WHEAT

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

HEALTH CARE. Provides relative to perinatal behavioral health treatment. (8/1/25)

AN ACT

To enact R.S. 22:1077.4 and R.S. 46:447.4, relative to perinatal behavioral health treatment; to require commercial insurance and Medicaid coverage for voluntary inpatient treatment following a perinatal psychiatric diagnosis; to provide for definitions; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:1077.4 is hereby enacted to read as follows:

**§1077.4. Inpatient treatment following a perinatal psychiatric diagnosis;**  
**commercial insurance**

**A. Any health benefit plan offered by a health insurance issuer that provides mental health benefits with respect to treatment for perinatal psychiatric diagnoses shall provide coverage for voluntary inpatient treatment for a patient with a perinatal psychiatric diagnosis. Inpatient admissions, including overnight stays, and medications resulting from treatments, including infusions and prescriptions, and counseling shall be covered services.**

**B. All decisions regarding voluntary inpatient treatment following a perinatal psychiatric diagnosis shall be made solely by an attending physician**

1 in consultation with the patient. All levels of maternal mental health inpatient  
2 treatment as provided for in this Section shall be considered medically  
3 necessary and shall not be excluded from coverage. Health insurance issuers  
4 shall not deny coverage for voluntary inpatient treatment for a patient with a  
5 perinatal psychiatric diagnosis if determined to be medically necessary by a  
6 physician.

7 C. Any voluntary admission covered by this Section shall be in  
8 accordance with R.S. 28:52.

9 D. For purposes of this Section, the following terms have the following  
10 meanings:

11 (1) "Health benefit plan" means any hospital, health, or medical expense,  
12 insurance policy, hospital or medical service contract, employee welfare benefit  
13 plan, contract, or other agreement with a health maintenance organization or  
14 a preferred provider organization, health and accident insurance policy, or any  
15 other insurance contract of this type in this state, including a group insurance  
16 plan and the Office of Group Benefits programs. "Health benefit plan" does not  
17 include a plan providing coverage for excepted benefits as defined in R.S.  
18 22:1061, limited benefit health insurance plans, and short-term policies that  
19 have a term of less than twelve months.

20 (2) "Health insurance issuer" means an entity subject to the insurance  
21 laws and regulations of this state, or subject to the jurisdiction of the  
22 commissioner, that contracts or offers to contract to provide, deliver, arrange  
23 for, pay for, or reimburse any of the costs of healthcare services, including  
24 through a health benefit plan as defined in this Section, and includes a sickness  
25 and accident insurance company, a health maintenance organization, a  
26 preferred provider organization, or any similar entity, or any other entity  
27 providing a plan of health insurance or health benefits.

28 (3) "Perinatal psychiatric diagnosis" means a psychiatric disorder  
29 requiring inpatient treatment during pregnancy through one year postpartum,

which includes one year after a pregnancy loss.

E. The implementation of the provisions of this Section shall be subject to the appropriation of funds by the legislature for this purpose.

Section 2. R.S. 46:447.4 is hereby enacted to read as follows:

§447.4. Inpatient treatment following a perinatal psychiatric diagnosis;

Medicaid

A. Medicaid managed care organizations shall provide coverage for voluntary inpatient treatment for a Medicaid recipient with a perinatal psychiatric diagnosis. Inpatient admissions, including overnight stays, and medications resulting from treatments, including infusions and prescriptions, and counseling shall be covered services.

B. All decisions regarding voluntary inpatient treatment following a perinatal psychiatric diagnosis shall be made solely by an attending physician in consultation with the patient.

C. Any voluntary admission covered by this Section shall be in accordance with R.S. 28:52.

D. For purposes of this Section, "perinatal psychiatric diagnosis" means a psychiatric disorder requiring inpatient treatment during pregnancy through one year postpartum, which includes one year after a pregnancy loss.

E. The implementation of the provisions of this Section shall be subject to the appropriation of funds by the legislature for this purpose.

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The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Senate Legislative Services. The keyword, summary, 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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DIGEST

SB 42 Reengrossed

2025 Regular Session

Selders

Proposed law requires health benefit plans offered by a health insurance issuer that provide mental health benefits with respect to treatment for perinatal psychiatric diagnoses and Medicaid managed care organizations to provide coverage for voluntary inpatient treatment for a patient with a perinatal psychiatric diagnosis.

Proposed law specifies that inpatient admissions, including overnight stays, and medications resulting from treatments, including infusions and prescriptions, and counseling are covered

services.

Proposed law prohibits health insurers from denying coverage for voluntary inpatient treatment for a patient with a perinatal psychiatric diagnosis if determined to be medically necessary by a physician.

Implementation of proposed law shall be subject to the appropriation of funds by the legislature for this purpose.

Effective August 1, 2025.

(Adds R.S. 22:1077.4 and R.S. 46:447.4)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the original bill

1. Make technical changes.
2. Delete the Medicaid coverage requirement that inpatient treatment be considered medically necessary and the prohibition against exclusion from coverage.

Committee Amendments Proposed by Senate Committee on Finance to the engrossed bill

1. Provide that implementation of proposed law shall be subject to the appropriation of funds by the legislature for this purpose.