

2025 Regular Session

HOUSE RESOLUTION NO. 292

BY REPRESENTATIVES BERAULT, ADAMS, BAYHAM, CARLSON, ROBBY  
CARTER, CARVER, CHASSION, FISHER, JACKSON, LYONS, SPELL, AND  
WYBLE

A RESOLUTION

To urge and request the Louisiana Department of Health to study the feasibility of updating its Medicaid coverage policy and fee schedule to more adequately provide access to healthcare services required by individuals at-risk for gestational diabetes mellitus or otherwise qualifying gestational diabetes mellitus patients and report its findings no later than January 1, 2026.

WHEREAS, the Louisiana Department of Health has determined maternal health to be a priority within its Strategic Plan; and

WHEREAS, gestational diabetes mellitus (GDM) occurrences in the Louisiana Medicaid population increased from ten and two-tenths percent to fourteen and eight-tenths percent in recent years and have remained around fourteen percent; and

WHEREAS, prominent risk factors for GDM, such as obesity and sedentary behaviors, remain prevalent in the Louisiana Medicaid population in addition to Medicaid populations typically facing additional health adversities; and

WHEREAS, increased occurrences of GDM have been linked to the long-term future health of both the mother and child; and

WHEREAS, continuous glucose monitoring (CGM) services have been proven to significantly reduce the complications arising from GDM by providing real-time glucose readings and helping guide informed decisions involving insulin usage, diet, and exercise, as well as insights involving nocturnal hyperglycemia; and

WHEREAS, current CGM Medicaid coverage policies provide coverage only for insulin-dependent GDM patients and do not afford coverage for all at-risk or otherwise qualifying GDM patients; and

WHEREAS, if not appropriately managed, GDM can result in complexities and additional risks for both the mother and the child through the pregnancy, such as excessive fetal growth, premature births, and respiratory distress; and

WHEREAS, the cost for expanding coverage to additional qualifying GDM Medicaid patients is estimated to be between five hundred thousand and one million dollars; and

WHEREAS, incentive-based reimbursement mechanisms already in existence between the Louisiana Department of Health, Healthy Louisiana Managed Care Organizations, and hospitals could afford the opportunity to expand coverage with existing resources.

THEREFORE, BE IT RESOLVED that the House of Representatives of the Legislature of Louisiana does hereby urge and request the Louisiana Department of Health to study the feasibility of updating its Medicaid coverage policy and fee schedule to more adequately provide access to continuous glucose monitoring services for all at-risk or otherwise qualifying maternal patients facing gestational diabetes mellitus.

BE IT FURTHER RESOLVED that the Louisiana Department of Health shall study the potential coverage policy updates, the costs associated with expanding the Louisiana Medicaid CGM coverage policies for maternal health, the long-term cost savings to the Louisiana healthcare system, and the potential health risks of leaving current policies in place.

BE IT FURTHER RESOLVED that the Louisiana Department of Health shall provide a written report of its findings including a coverage policy analysis to the House Committee on Health and Welfare no later than January 1, 2026, unless after performing the study the Louisiana Department of Health elects to update the maternal CGM coverage policy prior to that date.

BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the secretary of the Louisiana Department of Health.

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SPEAKER OF THE HOUSE OF REPRESENTATIVES