

CONFERENCE COMMITTEE REPORT

SB 42

2025 Regular Session

Selders

June 10, 2025

To the Honorable President and Members of the Senate and to the Honorable Speaker and Members of the House of Representatives.

Ladies and Gentlemen:

We, the conferees appointed to confer over the disagreement between the two houses concerning Senate Bill No. 42 by Senator Selders, recommend the following concerning the Reengrossed bill:

1. That the set of House Committee Amendments proposed by the House Committee on Insurance and adopted by the House of Representatives on May 29, 2025, be adopted.
2. That the set of House Floor Amendments proposed by Representative Miller and adopted by the House of Representatives on June 4, 2025, be adopted.
3. That the following amendment to the engrossed bill be adopted:

AMENDMENT NO. 1

On page 2, delete lines 5 and 6 and insert "**perinatal psychiatric diagnosis that is consistent with these standards.**"

Respectfully submitted,

Senators:

Senator Larry Selders

Senator Heather Miley Cloud

Senator Glen Womack

Representatives:

Representative Dustin Miller

Representative Michael "Gabe" Firment

Representative Adrian Fisher

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The legislative 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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## CONFERENCE COMMITTEE REPORT DIGEST

**SB 42**

**2025 Regular Session**

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### **Keyword and summary of the bill as proposed by the Conference Committee**

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

#### **Report adopts House amendments to:**

1. Expand types of healthcare providers who can consult with a patient regarding voluntary inpatient treatment following a perinatal psychiatric diagnosis.
2. Added guideline standards for treating physicians relative to patient treatment recommendations.
3. Provide benefits are subject to the health plan's annual deductibles, coinsurance, and copayment provisions
4. Allow the Louisiana Medicaid Program to establish criteria for payment of covered Medicaid Services and criteria for medical necessity.
5. Provide dates of applicability relative to coverage plans.

#### **Report amends the bill to:**

1. Prohibit insurers from denying coverage for voluntary inpatient treatment determined to be consistent with standards for treatment of condition.

### **Digest of the bill as proposed by the Conference Committee**

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 when the treatment is consistent with standards for treatment of the condition.

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

Proposed law adds physician assistants, psychiatrists, psychologists, medical psychologists, or nurse practitioners, as treating healthcare providers, who in consultation with the patient can make decisions regarding voluntary inpatient treatment following a perinatal psychiatric diagnosis.

Proposed law subjects coverage to the annual deductibles, coinsurance, and copayment provisions of the insurer's health benefit plan.

Proposed law provides for the consideration of evidence based standards by physicians in making patient treatment recommendations.

Proposed law allows, but does not require, the Louisiana Medicaid Program to establish criteria for payment of covered Medicaid services.

Proposed law applies to any new policy, contract, or health coverage plan issued on and after January 1, 2026.

Proposed law converts any policy, contract, or health coverage plan in effect prior to January 1, 2026 to the new provisions on or before the renewal date but no later than January 1, 2027.

Effective August 1, 2025.

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