SLS 16RS-2517 **ORIGINAL**

2016 Regular Session

SENATE BILL NO. 476 (Substitute of Senate Bill No. 132 by Senator Martiny)

BY SENATOR MARTINY

HEALTH/ACC INSURANCE. Requires health insurance coverage for temporal mandibular joint disorders. (gov sig)

1	AN ACT
2	To enact R.S. 22:1055, relative to the requirement for health insurance coverage of diagnosis
3	and treatment for temporal mandibular joint and associated musculature and
4	neurology; to provide for an effective date; and to provide for related matters.
5	Be it enacted by the Legislature of Louisiana:
6	Section 1. R.S. 22:1055 is hereby enacted to read as follows:
7	§1055. Requirement for coverage of diagnosis and treatment for temporal
8	mandibular joint and associated musculature and neurology
9	A. Every hospital, health, or medical expense insurance policy in the
10	large group market as defined in R.S. 22:1091(B), delivered or issued for
11	delivery in this state shall include coverage for diagnostic, therapeutic, or
12	surgical procedures related to the temporal mandibular joint (TMJ) and
13	associated musculature and neurological conditions. This Section shall not apply
14	to coverage provided by the Office of Group Benefits.
15	B. The coverage for diagnostic, therapeutic, or surgical procedures
16	related to temporal mandibular joint and associated musculature and
17	neurological conditions shall be subject to the same conditions, limitations,

1 precertification, prior authorization, referral procedures, copayment, and 2 coinsurance provisions that apply to coverage for diagnostic, therapeutic, or 3 surgical procedures involving other bones or joints of the human skeleton. C. The provisions of this Section shall apply to all new policies, plans, 4 certificates, and contracts issued on or after January 1, 2018. Existing policies, 5 plans, certificates, and contracts shall include the coverage required by this 6 7 Section on renewal thereof, but in no case later than January 1, 2019. 8 Section 2. This Act shall become effective upon signature by the governor or, if not 9 signed by the governor, upon expiration of the time for bills to become law without signature 10 by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If 11 vetoed by the governor and subsequently approved by the legislature, this Act shall become 12 effective on the day following such approval.

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Cheryl Cooper.

DIGEST 2016 Regular Session

Martiny

<u>Proposed law</u> requires every hospital, health, or medical expense insurance policy in the large group market as defined in <u>present law</u> to include coverage of diagnosis and treatment for temporal mandibular joint (TMJ) and associated musculature and neurological conditions.

<u>Proposed law</u> exempts the Office of Group Benefits (OGB) from the requirements of <u>proposed law</u>.

<u>Proposed law</u> requires the TMJ insurance coverage to be subject to the same conditions, limitations, precertification, prior authorization, referral procedures, copayment, and coinsurance provisions that apply coverage for diagnosis and treatment involving other bones or joints of the human skeleton.

<u>Proposed law</u> applies to all new policies, plans, certificates, and contracts issued on or after January 1, 2018. Further requires existing policies, plans, certificates, and contracts to include coverage for TMJ by January 1, 2019.

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

(Adds R.S. 22:1055)

SB 476 Original