RÉSUMÉ DIGEST

ACT 145 (HB 694) 2016 Regular Session

Moreno

<u>New law</u> clarifies the required coverage of reconstructive surgeries following mastectomies as follows:

- (1) <u>Prior law</u> required coverage of reconstructive surgeries following mastectomies by various types of health insurers, health plans, PPOs, and HMOs.
 - <u>New law</u> requires such coverage by a "health benefit plan" offered by a "health insurance issuer", both broad terms which encompass all of the types of plans and entities provided for by prior law.
- (2) Simplifies <u>existing law</u> by stating that a health benefit plan that provides medical and surgical benefits for a partial or full mastectomy shall also provide such benefits for breast reconstruction.
- (3) <u>Prior law</u> provided that such coverage shall be in a manner determined in consultation with the attending physician and the patient.
 - <u>New law</u> instead provides that coverage shall be for breast reconstruction procedures selected by the patient in consultation with attending physicians.
- (4) <u>Prior law</u> provided that such coverage may be subject to annual deductibles, coinsurance, and copayment provisions as may be deemed appropriate and as are consistent with those established for other benefits under the plan or coverage.
 - <u>New law</u> provides that such coverage may be subject to annual deductibles, coinsurance, and copayment provisions as are consistent with those established for mastectomy procedures under the health benefit plan.
- (5) Existing law prohibits health benefit plans from: (a) denying a patient eligibility, or continued eligibility, to enroll or to renew coverage under the terms of the plan, solely for the purpose of avoiding the requirements of existing law; or (b) penalizing or otherwise reducing or limiting the reimbursement of an attending provider, or providing monetary or nonmonetary incentives to an attending provider, to induce such provider to provide care in a manner inconsistent with existing law.
 - <u>New law</u> additionally prohibits health benefit plans from: (a) requiring that mastectomy procedures and reconstructive procedures be performed under the same policy or plan; or (b) reducing or limiting coverage benefits to a patient for the reconstructive procedures performed pursuant to <u>new law</u> as determined in consultation with the attending physician and patient.
- (6) Defines the term "breast reconstruction" as all stages of reconstruction of the breast on which a mastectomy has been performed and on the other breast to produce a symmetrical appearance, including but not limited to liposuction performed for transfer to a reconstructed breast or to repair a donor site deformity, tattooing the areola of the breast, surgical adjustments of the non-mastectomized breast, and prostheses and physical complications, including but not limited to lymphedemas.
- (7) Provides for legislative findings.

Effective upon signature of governor (May 19, 2016).

(Amends R.S. 22:1077; Repeals R.S. 22:272(E) and R.S. 40:2209)