SLS 20RS-512 ENGROSSED

2020 Regular Session

SENATE BILL NO. 204

BY SENATOR TALBOT

INSURANCE POLICIES. Provides for health insurance coverage of cancer treatments. (gov sig)

1	AN ACT
2	To enact R.S. 22:1054.1, relative to health insurance coverage for cancer treatments; to
3	prohibit denial of coverage in certain circumstances; to require coverage of
4	prescription drugs that target a specific mutation for a minimum initial period; to
5	require a physician's certification for continued coverage; to provide for an effective
6	date; and to provide for related matters.
7	Be it enacted by the Legislature of Louisiana:
8	Section 1. R.S. 22:1054.1 is hereby enacted to read as follows:
9	§1054.1. Requirement for coverage of cancer treatment targeting a specific
10	genetic mutation
11	A. No health coverage plan delivered or issued for delivery in this state
12	shall deny coverage for a medically necessary drug prescribed by a physician
13	on the sole basis that the drug is not indicated for the location in the body of the
14	patient's cancer if the drug is approved by the United States Food and Drug
15	Administration for the treatment of the specific mutation of the patient's
16	cancer.
17	B.(1) Any health coverage plan delivered or issued for delivery in this

1 state shall include coverage for a minimum initial treatment period of not less 2 than three months for a medically necessary drug prescribed by a physician 3 that is not indicated for the location in the body of the patient's cancer if the drug is approved by the United States Food and Drug Administration for the 4 treatment of the specific mutation of the patient's cancer. 5 (2) The health coverage plan shall continue to provide coverage of the 6 prescribed drug after the initial treatment period provided for in Paragraph (1) 7 8 of this Subsection if the treating physician certifies that the prescribed drug is 9 necessary for the treatment of the patient's cancer. 10 C. For purposes of this Section, "health coverage plan" means any 11 hospital, health, or medical expense insurance policy, hospital or medical 12 service contract, employee welfare benefit plan, contract, or other agreement 13 with a health maintenance organization or a preferred provider organization, health and accident insurance policy, or any other insurance contract of this 14 type in this state, including a group insurance plan, a self-insurance plan, and 15 16 the Office of Group Benefits programs. "Health coverage plan" shall not include a plan providing coverage for excepted benefits as defined in R.S. 17 22:1061, limited benefit health insurance plans, and short-term policies that 18 19 have a term of less than twelve months. Section 2. This Act shall become effective upon signature by the governor or, if not 20 signed by the governor, upon expiration of the time for bills to become law without signature 21 by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If 22 vetoed by the governor and subsequently approved by the legislature, this Act shall become 23 24 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 B. Cooper.

> > **DIGEST** 2020 Regular Session

Talbot

SB 204 Engrossed

Proposed law prohibits a health coverage plan delivered or issued for delivery in this state from denying coverage for a medically necessary drug prescribed by a physician on the sole basis that the drug is not indicated for the location in the body of the patient's cancer if the drug is approved by the United States Food and Drug Administration (FDA) for the treatment of the specific mutation of the patient's cancer.

<u>Proposed law</u> requires any health coverage plan delivered or issued for delivery in this state to include coverage for a minimum initial treatment period of at least three months for a medically necessary drug prescribed by a physician that is not indicated for the location in the body of the patient's cancer if the drug is approved by the FDA for the treatment of the specific mutation of the patient's cancer.

<u>Proposed law</u> requires the health coverage plan to continue to provide coverage of the prescribed drug after the initial treatment period if the treating physician certifies that the prescribed drug is necessary for the treatment of the patient's cancer.

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

(Adds R.S. 22:1054.1)