DIGEST

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HB 754 Original

2016 Regular Session

Talbot

Abstract: Provides for the time of modification of drug coverage in the group and individual market by a health insurance issuer.

<u>Present law</u>, relative to guaranteed renewability of coverage in the group and individual market, makes modification of health insurance coverage subject to the following conditions:

- (1) The modification must occur at the time of coverage renewal.
- (2) The modification must be approved by the commissioner of insurance and must be effective on a uniform basis among all entities or individuals covered by that health plan. However, modifications affecting drug coverage do not require approval by the commissioner.
- (3) The issuer notifies, on a form approved by the Department of Insurance, each affected covered entity or individual of the modification, including modification of coverage of a particular product or modification of drug coverage, not later than the 60th day before the date the modification is effective.

<u>Proposed law</u> provides that the requirement that the modification occur at the time of coverage renewal shall not apply to any modification affecting drug coverage.

(Amends R.S. 22:1068(D)(1) and 1074(D)(1))