
The original 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)]

DIGEST

SB 404 Reengrossed

2026 Regular Session

McMath

Present law provides for requirements and prohibitions for medical eye care or vision care benefits provided by or available through a health benefit plan, health maintenance organization, preferred provider organization, managed care organization, accountable care organization, or contract of insurance or any medical hospital service contract that are within the lawful scope of practice of a duly licensed optometrist.

Proposed law expands the applicability of present law to vision benefit plans, vision benefit discount plans, and any agent acting on behalf of any plan or entity that offers an agreement or contract of insurance that provides medical eye care or vision care benefits.

Proposed law provides that proposed law shall be cited as the "Louisiana Vision Plan Transparency and Fair Practice Act".

Proposed law provides that proposed law shall not be construed to expand or limit the scope of practice of any healthcare provider.

Proposed law provides that proposed law does not apply to medical benefits provided by an insurer under a health benefit plan that is not a vision benefit plan or vision discount plan.

Proposed law provides for legislative findings and definitions relative to eye care providers and services, vision benefit managers, and vision benefit plans.

Proposed law provides for requirements and prohibitions relative to covered and noncovered services and fee schedules in contracts or agreements between insurers or vision benefit managers and eye care providers.

Proposed law provides for requirements and prohibitions for eye care provider participation and credentialing by an insurer or vision benefit manager.

Proposed law provides for transparency and disclosure requirements for insurers and vision benefit managers.

Proposed law establishes requirements for amending contracts and agreements between eye care providers and insurers or vision benefit managers.

Proposed law prohibits an insurer or vision benefit manager from using extrapolation to complete

an audit of a participating eye care provider.

Proposed law establishes a private right of action for any eye care provider adversely affected by a violation of proposed law, including injunctive relief and monetary damages of up to \$10,000 for each violation, plus attorney fees and costs.

Proposed law provides for the authority of the Dept. of Insurance and the attorney general to enforce the provisions of proposed law.

Proposed law provides for the applicability, severability, and effectiveness of proposed law.

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

(Amend R.S. 22:997; adds R.S. 22:1809-1809.15)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Health and Welfare to the original bill

1. Adds provision that proposed law does not change the scope of practice of any healthcare provider.

Senate Floor Amendments to engrossed bill

1. Adds provision relative to the applicability of proposed law.
2. Makes technical changes.