## RÉSUMÉ DIGEST

New law requires any health insurance issuer offering health coverage plans in La. that provide hospital, medical, or surgical benefits to provide coverage for medically necessary expenses for diseases and conditions caused by severe obesity and certain severe obesity treatments to the extent services are covered by the Essential Health Benefits (EHB) Benchmark Plan in accordance with state and federal law.

New law requires the covered insured to be at least 18 years of age to be eligible for bariatric surgery coverage. New law allows the health insurance issuer to require a covered person successfully complete a pre-operative period prior to bariatric surgery.

New law permits a health insurance issuer to restrict services for bariatric surgery to certain facilities and provides that issuers may require prior authorization for bariatric surgery. New law further provides that coverage for bariatric surgery may be limited to once per lifetime.

Furthermore, the coverage provided by new law does not apply to injectable drugs to lower glucose levels or any other prescribed weight loss drugs.

New law requires the prescribing physician to issue a written order verifying certain information.

New law defines "body mass index", "health coverage plan", and "severe obesity".
New law applies to any new policy, contract, program, or health coverage plan issued on and after Jan. 1, 2025, and requires any policy, contract, or health coverage plan in effect prior to Jan. 1, 2025, to convert to conform to new law on or before the renewal date, but no later than Jan. 1, 2026.

New law requires the La. Dept. of Health to evaluate bariatric surgery, pre-operative psychological screening and counseling, behavior modification, nutritional counseling, and post-operative follow-up, overview, and counseling of dietary, exercise, and lifestyle changes for coverage by the EHB Benchmark Plan during its next review of the plan.

Effective August 1, 2024.
(Adds R.S. 22:1047)

