

RÉSUMÉ DIGEST

ACT 621 (HB 508)

2024 Regular Session

Bagley

New law provides that decisions regarding treatment procedures performed following a diagnosis of cancer are to be made solely by the patient in consultation with the attending physician. Requires consulting physicians to consider recognized, evidence-based standards, such as those of the Nat'l Comprehensive Cancer Network.

New law clarifies that all levels of medical and surgical treatment are medically necessary and prohibits such treatment from coverage exclusion.

New law requires a health benefit plan offered by a health insurance issuer that provides medical and surgical benefits for cancer treatments to cover the medical and surgical treatments corresponding to urinary and sexual dysfunction resulting from treatments that have been chosen by a patient diagnosed with cancer. Further prohibits denial of coverage for procedures correcting urinary and sexual dysfunction resulting from treatments, including penile injections, external pumps, and surgical implants, as chosen by a patient in consultation with the attending physician.

New law defines "health benefit plan" and "health insurance issuer".

New law applies to health insurance policies, contracts, or plans issued on and after Jan. 1, 2025, and requires existing policies, contracts, and plans to conform to new law by Jan. 1, 2026.

Effective August 1, 2024.

(Adds R.S. 22:1077.3)