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SB 231 Engrossed	DIGEST 2025 Regular Session	Reese
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Present law (R.S. 9:2800.27) provides that certain medical expenses are recoverable and provides limitation on admissibility of evidence related to recoverable past medical expenses.

Present law defines "contracted medical provider", "cost of procurement", "cost sharing", "health insurance issuer", and "medical provider".

Proposed law retains present law.

Proposed law provides that "health care provider" means a physician or health care practitioner licensed, certified, and registered to perform specified health care services in accordance with the applicable law and any facility or institution providing health care services, including but not limited to a hospital, licensed inpatient center, ambulatory, surgical, or treatment center, skilled nursing facility, inpatient hospice facility, residential treatment center, diagnostic laboratory or imaging center, or rehabilitation or therapeutic health setting.

Proposed law provides that "health insurance coverage" means benefits consisting of health care services provided through insurance, or reimbursement, which includes items and services paid for as health care services under any hospital or medical service policy or certificate, hospital or medical service plan contract, preferred provider organization agreement, or health maintenance organization contract offered by a private health insurer, the Office of Group Benefits, Medicare, Medicaid, Louisiana Workers' Compensation Law, or equivalent state health plans.

Present law provides that in cases where a claimant's medical expenses have been paid, in whole or in part, by a health insurance issuer or Medicare to a contracted medical provider, the claimant's recovery of medical expenses is limited to the amount actually paid to the contracted medical provider by the health insurance issuer or Medicare, and any applicable cost sharing amounts paid or owed by the claimant, and not the amount billed. The court shall award to the claimant 40% of the difference between the amount billed and the amount actually paid to the contracted medical provider by a health insurance issuer or Medicare in consideration of the claimant's cost of procurement, provided that this amount shall be reduced if the defendant proves that the recovery of the cost of procurement would make the award unreasonable. The determination of this award shall be made only as provided by present law.

Proposed law retains present law, but decreases the amount the court shall award to the claimant from 40% to 30% of the difference between the amount billed and the amount actually paid to the contracted medical provider.

Present law provides that in cases where a claimant's medical expenses have been paid, in whole or in part, by Medicaid to a medical provider, the claimant's recovery of medical expenses actually paid by Medicaid is limited to the amount actually paid to the medical provider by Medicaid, and any applicable cost sharing amounts paid or owed by the claimant, and not the amount billed.

Proposed law retains present law.

Present law provides that the recovery of past medical expenses other than those provided by present law shall be limited to amounts paid to a medical provider by or on behalf of the claimant, and amounts remaining owed to a medical provider, including medical expenses secured by a contractual or statutory privilege, lien, or guarantee. Present law provides that the determination of the award shall be made only in accordance with present law. Proposed law retains present law but provides that the award shall not exceed 300% of the Medicare fee schedule for services.

Present law provides that in cases where a claimant's medical expenses are paid pursuant to the Louisiana Workers' Compensation Law as provided in present law, a claimant's recovery of medical expenses is limited to the amount paid under the medical payment fee schedule of present law.

Proposed law retains present law.

Present law provides that in a jury trial, only after a jury verdict is rendered may the court receive evidence related to the limitations of recoverable past medical expenses provided by present law. Present law further provides that the jury shall be informed only of the amount billed by a medical provider for medical treatment. Present law provides that whether any person, health insurance issuer, or Medicare has paid or has agreed to pay, in whole or in part, any of a claimant's medical expenses, shall not be disclosed to the jury, but that in trial to the court alone, the court may consider such evidence.

Proposed law retains present law but provides that whether any person, health insurance issuer, or Medicare has paid or has agreed to pay, in whole or in part, any of a claimant's medical expenses, shall not be disclosed to the jury, but shall be discoverable before trial subject to present law, including the Code of Civil Procedure and Code of Evidence.

Proposed law provides that the recovery of medical expenses by a claimant shall not include attorney-negotiated write-offs or discounts for medical expenses obtained as a product of the litigation process. Attorney fees paid by the claimant to recover medical expenses shall not be deemed consideration that diminishes a claimant's patrimony.

Present law provides that present law shall not apply in cases brought pursuant to present law (Medical Malpractice and Malpractice Liability for State Services).

Proposed law retains present law and provides that proposed law shall not apply in cases brought pursuant to present law (Medical Malpractice and Malpractice Liability for State Services) or to any benefits received by a party through a policy of automobile liability insurance that provides for medical payments coverage.

Proposed law provides that the provisions of proposed law shall have prospective application only and shall not apply to causes of action filed prior to the effective date of proposed law.

Effective on January 1, 2026.

(Amends R.S. 9:2800.27; adds R.S. 9:2800.27(H))

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Judiciary A to the original bill

1. Makes technical changes.
2. Defines "health care provider" and "health insurance coverage".
3. Decreases the amount the court shall award to the claimant from 40% to 30% of the difference between the amount billed and the amount actually paid to the contracted medical provider.
4. Provides that the determination of the award of recoverable past medical expenses in certain circumstances, shall be limited to amounts paid to a medical provider on behalf of the claimant, and amounts remaining owed to a medical provider shall not exceed 300% of the Medicare fee schedule for services.
5. Specifies that the recovery of medical expenses by a claimant shall not include attorney-negotiated write-offs or discounts for medical expenses obtained as a product of the litigation process.
6. Specifies that attorney fees paid by the claimant to recover medical expenses shall not be deemed consideration that diminishes a claimant's patrimony.
7. Provides that the proposed law does not apply to any benefits received through automobile liability insurance that provides for medical payments coverage.