

2026 Regular Session

SENATE BILL NO. 464

BY SENATOR BARROW

HEALTH CARE. Provides relative to coverage for severe obesity treatment. (gov sig)

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AN ACT

To amend and reenact R.S. 22:1047(B), relative to coverage for severe obesity treatment; to provide for cost calculations; to provide for duties of the Louisiana Department of Insurance; to provide for legislative appropriations; to provide for changes to minimum coverage standards; to provide for an effective date; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:1047(B) is hereby amended and reenacted to read as follows:

§1047. Required coverage for severe obesity treatment

* * *

~~B.(1) Subsections C, D, E, and F of this Section shall apply only to a health insurance issuer offering health coverage plans in this state to the extent that services are covered by the Essential Health Benefits Benchmark Plan selected by the state in accordance with applicable federal regulations.~~ **No later than August 1, 2026, and annually thereafter, each insurer offering a health coverage plan that meets the definition of a "qualified health plan" as defined in 42 U.S.C. 18021 shall submit to the Louisiana Department of Insurance an estimate, produced by a**

1 member of the American Academy of Actuaries and in accordance with
2 generally accepted actuarial principles and methodologies, of the cost to provide
3 the benefits required by this Section for calendar year 2028, and subsequent
4 years thereafter. Unless otherwise modified by the commissioner of insurance,
5 such estimate shall include all cost elements including expected volumes of
6 services per member-month, the assumed population, and both an aggregate
7 and per-member per-month estimate.

8 (2) ~~The Louisiana Department of Health shall evaluate bariatric surgery,~~
9 ~~pre-operative psychological screening and counseling, behavior modification,~~
10 ~~nutritional counseling, and post-operative follow-up, overview, and counseling of~~
11 ~~dietary, exercise, and lifestyle changes for coverage by the Essential Health Benefits~~
12 ~~Benchmark Plan during its next review of the Essential Health Benefits Benchmark~~
13 ~~Plan. No later than December 1, 2026, and annually thereafter, the Louisiana~~
14 ~~Department of Insurance shall publish an estimated cost for the state to defray~~
15 ~~the cost of services required by this Section as required by 42 U.S.C. 18031.~~

16 (3) No later than July 1, 2027, and annually thereafter, the Louisiana
17 Department of Insurance shall notify all health insurance issuers and all health
18 plans of the funding ratio and the minimum coverage standard for this Section.
19 The funding ratio shall be calculated by dividing those sums appropriated by
20 the legislature to be spent to defray the cost of services required by this Section
21 by the estimated cost needed to defray those costs as published pursuant to
22 Paragraph (2) of this Subsection. The minimum coverage standard shall be
23 calculated by multiplying the aggregate expected volumes of services per
24 member-month by the funding ratio.

25 (4) Beginning on January 1, 2028, for any plan year during which the
26 published funding ratio meets or exceeds 1.0, no health insurance issuer subject
27 to this Section shall apply a numerical cap to the services required under this
28 Section. For any plan year during which the published funding ratio is less than
29 1.0, a health insurance issuer subject to this Section may apply a numerical cap

Proposed law provides that, beginning on Jan. 1, 2028, for any plan year during which the published funding ratio meets or exceeds 1.0, no health insurance issuer subject to proposed law shall apply a numerical cap to the services.

Proposed law provides that for any plan year during which the published funding ratio is less than 1.0, a health insurance issuer may apply a numerical cap to the services of no fewer than the product of the minimum coverage standard times the number of member-months from the most recent plan year, rounded up to the nearest whole number.

Proposed law requires any numerical cap to be stated in the health insurance plan documents and to be described using the actual numerical cap and not by reference to a formula.

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

(Amends R.S. 22:1047(B))