
DIGEST

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HB 392 Reengrossed

2024 Regular Session

Freeman

Abstract: Provides for Medicaid and private insurance coverage for perimenopausal and menopausal care.

Proposed law requires La. Dept. of Health (LDH) to make available to persons who are eligible for Medicaid benefits under present law coverage benefits for hormonal menopausal care for any woman who is experiencing menopausal or perimenopausal symptoms.

Proposed law defines "perimenopausal" and "menopause".

Proposed law provides that symptoms for which such funding shall be made available include but are not limited to the following:

- (1) Irregular menstrual periods.
- (2) Hot flashes.
- (3) Vaginal or bladder problems.
- (4) Decrease in fertility.
- (5) Loss of bone.
- (6) Increase in low-density lipoprotein cholesterol levels.
- (7) Sleep disruption, which includes night sweats.

Proposed law provides that LDH may seek approval of a federal Medicaid waiver and state plan amendments as may be necessary to implement the provisions of this proposed law.

Proposed law requires the Medicaid program in this state to cover inpatient and, if deemed appropriate, outpatient coverage for perimenopausal or menopausal treatment or care when such care or treatment, is used for a medically accepted indication, and administered in any healthcare facility by any healthcare professional appropriately licensed in this state to provide such medical treatment or care in accordance with state and federal provisions.

Proposed law provides that the eligibility of a prospective enrollee shall be determined by the

healthcare facility appropriately providing perimenopausal or menopausal treatment or care as provided in proposed law.

Proposed law establishes certain requirements for the secretary of LDH in compliance with proposed law.

Proposed law requires health insurance issuers offering health coverage plans in this state that provide hospital, medical, or surgical benefits for individuals covered under a respective plan to provide coverage for expenses incurred for medically necessary perimenopausal and menopausal care or treatment.

(Adds R.S. 40:1259.1-1259.3)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Health and Welfare to the original bill:

1. Remove the requirement for coverage from private insurers for perimenopausal and menopausal care.
2. Make technical corrections.

The House Floor Amendments to the engrossed bill:

1. Require health insurance issuers offering health coverage plans in this state that provide hospital, medical, or surgical benefits for individuals covered under a respective plan to provide coverage for expenses incurred for medically necessary perimenopausal and menopausal care or treatment.
2. Make technical corrections.