SLS 25RS-227 ORIGINAL

2025 Regular Session

SENATE BILL NO. 42

BY SENATOR SELDERS

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

HEALTH CARE. Provides relative to perinatal behavioral health treatment. (8/1/25)

1	AN ACT
2	To enact R.S. 22:1077.4 and R.S. 46:447.4, relative to perinatal behavioral health treatment;
3	to require commercial insurance and Medicaid coverage for voluntary inpatient
4	treatment following a perinatal psychiatric diagnosis; to provide for definitions; and
5	to provide for related matters.
6	Be it enacted by the Legislature of Louisiana:
7	Section 1. R.S. 22:1077.4 is hereby enacted to read as follows:
8	§1077.4. Inpatient treatment following a perinatal psychiatric diagnosis;
9	commercial insurance
10	A. Any health benefit plan offered by a health insurance issuer that
11	provides mental health benefits with respect to treatment for perinatal
12	psychiatric diagnoses shall provide coverage for voluntary inpatient treatment
13	for a patient with a perinatal psychiatric diagnosis. Inpatient admissions,
14	including overnight stays, and medications resulting from treatments, including
15	infusions and prescriptions, and counseling shall be covered services.
16	B. All decisions regarding voluntary inpatient treatment following a
17	perinatal psychiatric diagnosis shall be made solely by an attending physician

1	in consultation with the patient. All levels of maternal mental health inpatient
2	treatment as provided for in this Section shall be considered medically
3	necessary and shall not be excluded from coverage. Health insurance issuers
4	shall not deny coverage for voluntary inpatient treatment for a patient with a
5	perinatal psychiatric diagnosis if determined to be medically necessary by a
6	physician.
7	C. Any voluntary admission covered by this Section shall be in
8	accordance with R.S. 28:52.
9	D. For purposes of this Section, the following terms have the following
10	meanings:
11	(1) "Health benefit plan" means any hospital, health, or medical expense,
12	insurance policy, hospital or medical service contract, employee welfare benefit
13	plan, contract, or other agreement with a health maintenance organization or
14	a preferred provider organization, health and accident insurance policy, or any
15	other insurance contract of this type in this state, including a group insurance
16	plan and the office of group benefits programs. "Health benefit plan" does not
17	include a plan providing coverage for excepted benefits as defined in R.S.
18	22:1061, limited benefit health insurance plans, and short-term policies that
19	have a term of less than twelve months.
20	(2) "Health insurance issuer" means an entity subject to the insurance
21	laws and regulations of this state, or subject to the jurisdiction of the
22	commissioner, that contracts or offers to contract to provide, deliver, arrange
23	for, pay for, or reimburse any of the costs of healthcare services, including
24	through a health benefit plan as defined in this Section, and includes a sickness
25	and accident insurance company, a health maintenance organization, a
26	preferred provider organization, or any similar entity, or any other entity
27	providing a plan of health insurance or health benefits.
28	(3) "Perinatal psychiatric diagnosis" means a psychiatric disorder
29	requiring inpatient treatment during pregnancy through one year postpartum,

1	which includes one year after a pregnancy loss.
2	Section 2. R.S. 46:447.4 is hereby enacted to read as follows:
3	§447.4. Inpatient treatment following a perinatal psychiatric diagnosis;
4	<u>Medicaid</u>
5	A. Medicaid managed care organizations shall provide coverage for
6	voluntary inpatient treatment for a Medicaid recipient with a perinatal
7	psychiatric diagnosis. Inpatient admissions, including overnight stays, and
8	medications resulting from treatments, including infusions and prescriptions,
9	and counseling shall be covered services.
10	B. All decisions regarding voluntary inpatient treatment following a
11	perinatal psychiatric diagnosis shall be made solely by an attending physician
12	in consultation with the patient. All levels of maternal mental health inpatient
13	treatment as provided for in this Section shall be considered medically
14	necessary and shall not be excluded from coverage. Medicaid managed care
15	organizations shall not deny coverage for voluntary inpatient treatment for a
16	patient with a perinatal psychiatric diagnosis if determined to be medically
17	necessary by a physician.
18	C. Any voluntary admission covered by this Section shall be in
19	accordance with R.S. 28:52.
20	D. For purposes of this Section, "perinatal psychiatric diagnosis" means
21	a psychiatric disorder requiring inpatient treatment during pregnancy through
22	one year postpartum, which includes one year after a pregnancy loss.
	The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Senate Legislative Services. The keyword, summary, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

DIGEST
SB 42 Original 2025 Regular Session

Selders

<u>Proposed law</u> requires health benefit plans offered by a health insurance issuer that provide mental health benefits with respect to treatment for perinatal psychiatric diagnoses and Medicaid managed care organizations to provide coverage for voluntary inpatient treatment for a patient with a perinatal psychiatric diagnosis.

<u>Proposed law</u> specifies that inpatient admissions, including overnight stays, and medications resulting from treatments, including infusions and prescriptions, and counseling are covered services.

<u>Proposed law</u> prohibits health insurers and Medicaid managed care organizations from denying coverage for voluntary inpatient treatment for a patient with a perinatal psychiatric diagnosis if determined to be medically necessary by a physician.

Effective August 1, 2025.

(Adds R.S. 22:1077.4 and R.S. 46:447.4)