

2025 Regular Session

HOUSE BILL NO. 34

BY REPRESENTATIVES GLORIOSO, CARLSON, CHENEVERT, DICKERSON,  
EDMONSTON, EGAN, MIKE JOHNSON, MELERINE, TURNER, WRIGHT,  
AND WYBLE

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

CIVIL/LAW: Provides for transparency in medical expenses

1 AN ACT

2 To amend and reenact R.S. 9:2800.27(A) through (D) and to repeal R.S. 9:2800.27(E)  
3 through (G), relative to recoverable medical expenses; to provide for definitions; to  
4 provide for the calculation of certain damages; to repeal certain limitations on  
5 admissible evidence; to provide for prospective application; and to provide for  
6 related matters.

7 Be it enacted by the Legislature of Louisiana:

8 Section 1. R.S. 9:2800.27(A) through (D) are hereby amended and reenacted to read  
9 as follows:

10 §2800.27. Recoverable past medical expenses; collateral sources; limitations;  
11 evidence

12 A. For the purpose of this Section:

13 (1) ~~"Contracted medical provider" means any in-network medical provider~~  
14 ~~that has entered into a contract or agreement directly with a health insurance issuer~~  
15 ~~or with a health insurance issuer through a network of providers for the provision of~~  
16 ~~covered healthcare services at a pre-negotiated rate, or any medical provider that has~~  
17 ~~billed and received payment for covered healthcare services from Medicare when the~~  
18 ~~provider is a participating provider in those programs.~~

1           ~~(2) "Cost of procurement" means the cost paid by or on behalf of the~~  
2           ~~claimant to procure the benefit paid by a health insurance issuer or Medicare and the~~  
3           ~~cost of procurement of the award of medical expenses, including but not limited to~~  
4           ~~contracted attorney fees and health insurance premiums paid.~~

5           ~~(3)~~ (1) "Cost sharing" means copayments, coinsurance, deductibles, and any  
6           other amounts which have been paid or are owed by the claimant to a medical  
7           provider.

8           ~~(4) "Health insurance issuer" means any health insurance coverage through~~  
9           ~~a policy or certificate of insurance subject to regulation of insurance under state law,~~  
10           ~~a health maintenance organization, an employer-sponsored health plan, the Office~~  
11           ~~of Group Benefits, or an equivalent federal or state health plan.~~

12           ~~(5)~~ (2) "Medical provider" means any healthcare provider, hospital,  
13           ambulance service, or their heirs or assignees.

14           ~~B. In cases where a claimant's medical expenses have been paid, in whole~~  
15           ~~or in part, by a health insurance issuer or Medicare to a contracted medical provider,~~  
16           ~~the claimant's recovery of medical expenses is limited to the amount actually paid~~  
17           ~~to the contracted medical provider by the health insurance issuer or Medicare, and~~  
18           ~~any applicable cost sharing amounts paid or owed by the claimant, and not the~~  
19           ~~amount billed. The court shall award to the claimant forty percent of the difference~~  
20           ~~between the amount billed and the amount actually paid to the contracted medical~~  
21           ~~provider by a health insurance issuer or Medicare in consideration of the claimant's~~  
22           ~~cost of procurement, provided that this amount shall be reduced if the defendant~~  
23           ~~proves that the recovery of the cost of procurement would make the award~~  
24           ~~unreasonable. The determination of this award shall be made only in accordance with~~  
25           ~~the provisions of Subsection F of this Section.~~

26           ~~C.~~ B. In cases where a claimant's medical expenses have been paid, in whole  
27           or in part, by Medicaid to a medical provider, the claimant's recovery of medical  
28           expenses actually paid by Medicaid is limited to the amount actually paid to the

1 medical provider by Medicaid, and any applicable cost sharing amounts paid or  
2 owed by the claimant, and not the amount billed.

3 ~~D. The recovery of past medical expenses other than those provided by~~  
4 ~~Subsection B or C of this Section shall be limited to amounts paid to a medical~~  
5 ~~provider by or on behalf of the claimant, and amounts remaining owed to a medical~~  
6 ~~provider, including medical expenses secured by a contractual or statutory privilege,~~  
7 ~~lien, or guarantee. The determination of this award shall be made only in accordance~~  
8 ~~with Subsection F of this Section.~~

9 E. C. In cases where a claimant's medical expenses are paid pursuant to the  
10 Louisiana Workers' Compensation Law as provided in R.S. 23:1020.1 et seq., a  
11 claimant's recovery of medical expenses is limited to the amount paid under the  
12 medical payment fee schedule of the Louisiana Workers' Compensation Law.

13 D. Except as provided by Subsections B and C of this Section, a claimant's  
14 recovery of medical expenses is limited to the reasonable expenses related to the  
15 claim. At trial, any party may introduce evidence of the amount billed, the amount  
16 paid, or both to establish the basis for an award for medical expenses. Any party  
17 may introduce evidence to establish or controvert the reasonableness of the medical  
18 expenses sought to be recovered by the claimant. Any agreements between the  
19 healthcare provider and a third party responsible for the financing or collection of  
20 medical expenses, including but not limited to a letter of protection or guarantee of  
21 payment between the healthcare provider and an attorney, shall be admissible  
22 evidence. The trier of fact shall make the determination of the amount of medical  
23 expenses to award, if any, after consideration of all evidence presented.

24 Section 2. R.S. 9:2800.27(E) through (G) are hereby repealed in their entirety.

25 Section 3. The provisions of this Act shall become effective on January 1, 2026.

26 Section 4. The provisions of this Act shall have prospective application only and  
27 shall not apply to causes of action filed prior to the effective date of this Act.

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**DIGEST**

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, 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)]

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HB 34 Engrossed

2025 Regular Session

Glorioso

**Abstract:** Provides relative to medical expenses that may be recovered at trial.

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

Proposed law removes the definitions of "contracted medical provider", "cost of procurement", and "health insurance issuer" from present law.

Present law provides that in cases where a claimant's medical expenses have been paid by a health insurance issuer or Medicare, the claimant's recovery of medical expenses is limited to the amount actually paid to the contracted medical provider and not the amount billed. The claimant is awarded 40% of the difference between the amount billed and the amount paid to the contracted medical provider in consideration of the claimant's cost of procurement provided that the amount shall be reduced if the defendant proves that the recovery would make the award unreasonable.

Proposed law repeals present law.

Present law provides that the recovery of medical expenses other than those paid by Medicare, Medicaid, or a health insurance issuer shall be limited to amounts paid to a medical provider by or on behalf of the claimant and amounts owed to a medical provider.

Proposed law repeals present law.

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

Proposed law repeals present law.

Proposed law provides that any party at trial may introduce evidence of either the amount billed, the amount paid, or both to establish the basis for an award for medical expenses and any party may introduce expert testimony to establish or controvert the reasonableness of medical expenses sought to be recovered by the claimant.

Proposed law provides that any agreement between a healthcare provider and a third party responsible for the financing or collection of medical expenses including a letter of protection or guarantee of payment between the healthcare provider and an attorney shall be admissible as evidence.

Proposed law provides that the trier of fact shall make a determination of the amount of medical expenses to award, if any, after all evidence has been presented.

Present law provides an exception to cases brought pursuant to the La. Medical Malpractice Act (R.S. 40:1231.1 et seq.).

Proposed law removes the exception in present law for cases brought pursuant to the La. Medical Malpractice Act (R.S. 40:1231.1 et seq.).

(Amends R.S. 9:2800.27(A)-(D); Repeals R.S. 9:2800.27(E)-(G))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Civil Law and Procedure to the original bill:

1. Make technical changes.
2. Remove the exception to the La. Medical Malpractice Act.
3. Remove the provision that in a jury trial the court may receive evidence related to the limitations of recoverable past medical expenses and that the jury shall be informed only of the amount billed by a medical provider.
4. Specify that at trial any party may introduce evidence of the amount billed, the amount paid, or both, to establish the basis for an award for medical expenses.
5. Provide that a letter of protection or guarantee of payment between the healthcare provider and an attorney shall be admissible evidence.