

SENATE SUMMARY OF HOUSE AMENDMENTS

SB 295

2026 Regular Session

Wheat

KEYWORD AND SUMMARY AS RETURNED TO THE SENATE

HEALTH/ACC INSURANCE. Provides for insurance coverage of services for persons with acquired brain injuries. (8/1/26)

SUMMARY OF HOUSE AMENDMENTS TO THE SENATE BILL

1. Provides that when compliance requires state funding under federal law, a qualified health plan is not obligated to offer benefits beyond those defined as essential health benefits under federal law.
2. Removes requirement that implementation of the provisions of the Act is subject to appropriation of funds by the legislature.
3. Makes technical changes.

DIGEST OF THE SENATE BILL AS RETURNED TO THE SENATE

SB 295 Reengrossed

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Proposed law requires every health coverage plan delivered or issued for delivery in this state to provide coverage, to the extent permitted by federal law, coverage for medically necessary treatment related to or as a result of an acquired brain injury.

Proposed law prohibits any lifetime limitation or unreasonable annual limitation of the number of days or sessions of treatment services. Proposed law further provides that any limitations on rehabilitation services in an inpatient rehabilitation facility shall be separate from and not included in any limitations of post-acute rehabilitation.

Proposed law provides that the required coverage shall not be subject to any greater deductible, coinsurance, copayments, or out-of-pocket limits than any other similar benefit provided by the health coverage plan.

Proposed law prohibits a health coverage plan from denying coverage for medically necessary treatment based solely on the location or setting in which the treatment is provided, if the treatment is provided in a setting that is clinically appropriate for the level of care necessary and in compliance with applicable state licensure, certification, registration, or accreditation requirements.

Proposed law provides that any adverse determination issued in connection with a preauthorization or utilization review must be made by a clinical peer reviewer. Proposed law further provides for an expedited appeal of any adverse determination by the health coverage plan issuer.

Proposed law provides that covered treatment and services must be provided by individual practitioners and treatment facilities qualified to provide acute care and post-acute care rehabilitation services to a person with an acquired brain injury.

Proposed law defines key terms including "acquired brain injury", "adverse determination", "clinical peer reviewer", "health coverage plan", "medically necessary treatment", and "post-acute residential treatment", and "community reintegration services".

Proposed law provides that to the extent that any provision of proposed law would otherwise require this state to make a payment under present law (42 U.S.C. 18031(d)(3)(B)(ii)), a qualified health plan, as defined by present law (45 CFR Part 155.20), shall not be required to provide a benefit under proposed law that exceeds the essential health benefits specified under present law (42 U.S.C. 18022(b)).

Proposed law applies to any new policy, contract, program, or health coverage plan issued on and after Jan. 1, 2027. Any policy, contract, or health coverage plan in effect prior to Jan. 1, 2027, shall convert on or before the renewal date, but no later than Jan. 1, 2028.

Effective August 1, 2026.

(Adds R.S. 22:1042.1)

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