

RÉSUMÉ DIGEST

ACT 713 (HB 1196)

2026 Regular Session

Freeman

Existing law mandates health insurance coverage for "routine colorectal cancer screening", which is defined in accordance with the most recently published guidelines from the American Cancer Society or the National Comprehensive Cancer Network.

Existing law stipulates that such screenings do not encompass services that are specifically excluded from coverage on the grounds of being experimental or investigational.

New law retains the provisions of existing law and delineates the classification of certain colorectal cancer screening procedures. New law establishes that any colonoscopy performed for the purpose of colorectal cancer screening be classified as a screening service, irrespective of whether a polyp or other tissue is excised during the procedure.

New law stipulates that any subsequent colonoscopy recommended by a healthcare provider as a result of findings from a routine colorectal cancer screening be recognized as a routine colorectal cancer screening, if such service is executed in accordance with the clinical guidelines referenced in existing law.

New law clarifies that coverage for routine colorectal cancer screenings is applicable only when services are rendered in alignment with the referenced clinical recommendations.

Effective August 1, 2026.

(Amends R.S. 22:1029(B))