

# ACT No. 621

2024 Regular Session

HOUSE BILL NO. 508

BY REPRESENTATIVE BAGLEY

1 AN ACT

2 To enact R.S. 22:1077.3, relative to health insurance coverage; to require coverage for a  
3 patient's choice of medical and surgical treatments following a diagnosis of cancer;  
4 to provide for definitions; and to provide for related matters.

5 Be it enacted by the Legislature of Louisiana:

6 Section 1. R.S. 22:1077.3 is hereby enacted to read as follows:

7 §1077.3. Required coverage for a patient's choice of medical and surgical treatments  
8 following a diagnosis and treatment of cancer

9 A. The purpose of this Section is to stress that decisions regarding the  
10 treatment procedures to be performed following a diagnosis of cancer shall be made  
11 solely by the patient in consultation with attending physicians, and to clarify that all  
12 levels of medical and surgical treatment as provided for in this Section are medically  
13 necessary and shall not be excluded from coverage. Consulting physicians shall  
14 consider recognized, evidence-based standards such as the guidelines of the National  
15 Comprehensive Cancer Network in making treatment recommendations.

16 B.(1) Any health benefit plan offered by a health insurance issuer that  
17 provides medical and surgical benefits with respect to treatment for cancer shall  
18 provide coverage for the medical and surgical treatment corresponding to urinary and  
19 sexual dysfunction resulting from the treatments, chosen by a patient diagnosed with  
20 cancer in consultation with the attending physician.

21 (2) A health benefit plan offered by a health insurance issuer that provides  
22 medical and surgical benefits with respect to cancer treatment shall not deny  
23 coverage for those procedures correcting urinary and sexual dysfunction resulting  
24 from treatments, including penile injections, external pumps, and surgical implants,

1 as chosen by a patient diagnosed with and treated for cancer in consultation with the  
2 attending physician.

3 C. For purposes of this Section, the following terms have the following  
4 meanings:

5 (1) "Health benefit plan" means any hospital, health, or medical expense  
6 insurance policy, hospital or medical service contract, employee welfare benefit plan,  
7 contract, or other agreement with a health maintenance organization or a preferred  
8 provider organization, health and accident insurance policy, or any other insurance  
9 contract of this type in this state, including a group insurance plan and the Office of  
10 Group Benefits programs. "Health benefit plan" does not include a plan providing  
11 coverage for excepted benefits as defined in R.S. 22:1061, limited benefit health  
12 insurance plans, and short-term policies that have a term of less than twelve months.

13 (2) "Health insurance issuer" means an entity subject to the insurance laws  
14 and regulations of this state, or subject to the jurisdiction of the commissioner, that  
15 contracts or offers to contract to provide, deliver, arrange for, pay for, or reimburse  
16 any of the costs of healthcare services, including through a health benefit plan as  
17 defined in this Section, and includes a sickness and accident insurance company, a  
18 health maintenance organization, a preferred provider organization, or any similar  
19 entity, or any other entity providing a plan of health insurance or health benefits.

20 Section 2. This Act shall apply to any new policy, contract, program, or health  
21 coverage plan issued on or after January 1, 2025. Any policy, contract, or health coverage  
22 plan in effect prior to January 1, 2025, shall convert to conform to this Act on or before the  
renewal date, but not later than January 1, 2026.

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SPEAKER OF THE HOUSE OF REPRESENTATIVES

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PRESIDENT OF THE SENATE

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GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: \_\_\_\_\_