

2020 Regular Session

SENATE BILL NO. 271

BY SENATOR JOHNS

HEALTH/ACC INSURANCE. Provides relative to the Health Care Consumer Billing and Disclosure Protection Act. (8/1/20)

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AN ACT

To amend and reenact R.S. 22:1872(23), 1873(C), 1874(A)(3), and 1878, relative to the Health Care Consumer Billing and Disclosure Protection Act; to provide for definitions; to provide relative to billing by contracted healthcare providers; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:1872(23), 1873(C), 1874(A)(3), and 1878 are hereby amended and reenacted to read as follows:

§1872. Definitions

As used in this Subpart:

\* \* \*

(23) "Noncovered health care services" means services, items, supplies, or drugs for the diagnosis, prevention, treatment, cure, or relief of a health condition, illness, injury, or disease that are neither covered under the terms of health insurance coverage nor required by law to be covered, **and care services or products excluded from the provisions of this Subpart pursuant to an advance written agreement by the enrollee or insured concerning specific payment terms when**

1 **authorized by this Subpart.**

2 §1873. Notice requirements

3 \* \* \*

4 C. If the patient approves in advance and in writing the charges for which the  
5 patient will be responsible, nothing in this Section shall be construed to prevent a  
6 dental **or vision** patient from choosing any type, form, or quality of dental procedure  
7 that is a noncovered health care service.

8 §1874. Billing by contracted healthcare providers

9 A. \* \* \*

10 (3) However, in the event that any billing, attempt to collect from, or the  
11 collection from an enrollee or insured of any amount other than those representing  
12 copayment, deductible, coinsurance, payment for noncovered or noncontracted  
13 health care services, or other amounts identified by the health insurance issuer as the  
14 liability of the enrollee or insured is based on information received from a health  
15 insurance issuer, the contracted health care provider shall not be in violation of this  
16 **Subsection Subpart.**

17 \* \* \*

18 §1878. Exception

19 Regardless of any contractual provisions contained in a health insurance  
20 contract or plan delivered in this state, should a patient receive a dental **or vision**  
21 diagnosis from a contracted provider for which the patient qualifies for a covered  
22 dental **or vision** service pursuant to the patient's health plan, the patient may choose  
23 either of the following:

24 (1) The covered service designated by the patient's health ~~or~~, dental, **or vision**  
25 plan for treatment of the condition diagnosed.

26  
27 (2) An alternate type, form, or quality of a dental **or vision** procedure **or**  
28 **product** to treat the diagnosed condition which procedure **or product** is of equal or  
29 greater price, provided that the patient approves the alternate procedure **or product**

1 in advance and in writing. For alternate services, ~~or~~ procedures, **or products**  
 2 provided pursuant to this Subsection, the provider shall be paid for the dental **or**  
 3 **vision** procedure **or product** as follows:

4 (a) The insurer shall pay the amount due for the covered procedure **or**  
 5 **product** which was an approved service **or product** for the treatment of the  
 6 diagnosed condition.

7 (b) The patient shall pay that amount which is the difference between the  
 8 amount of the covered service **or product** and the amount of the chosen alternate  
 9 service, ~~or~~ procedure, **or product**.

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The original instrument and the following digest, which constitutes no part  
 of the legislative instrument, were prepared by Cheryl B. Cooper.

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## DIGEST

SB 271 Original

2020 Regular Session

Johns

Present law provides for definitions relative to the Health Care Consumer Billing and Disclosure Protection Act.

Proposed law retains present law and adds to the definition of "noncovered healthcare services" care services or products excluded from the provisions of present law pursuant to an advance written agreement by the enrollee or insured concerning specific payment terms when authorized by present law.

Present law provides for exceptions to present law.

Proposed law retains present law and adds vision coverage to a health insurance contract or plan delivered in this state should a patient receive a diagnosis from a contracted provider for which the patient qualifies for covered service pursuant to the patient's health plan.

Effective August 1, 2020.

(Amends R.S. 22:1872(23), 1873(C), 1874(A)(3), and 1878)