SLS 24RS-361

ENGROSSED

2024 Regular Session

SENATE BILL NO. 368

BY SENATOR BASS

HEALTH/ACC INSURANCE. Provides for actuarial review of certain state-mandated health insurance benefits. (8/1/24)

1	AN ACT
2	To amend and reenact R.S. 44:4.1(B)(11), to enact Part VII of Chapter 11 of Title 22 of the
3	Louisiana Revised Statutes of 1950, to be comprised of R.S. 22:2183, and to repeal
4	Part VIII of Chapter 11 of Title 22 of the Louisiana Revised Statutes of 1950,
5	comprised of R.S. 22:2187, relative to state-mandated health insurance benefits; to
6	provide for selection of contractors to perform actuarial reviews of state-mandated
7	health insurance benefits; to provide for the performance of actuarial reviews of
8	proposed state-mandated health insurance benefits; to provide for requests for an
9	actuarial review; to provide for the content of an actuarial review and report; to
10	provide for use of an actuarial review and report; to provide for a public records
11	disclosure exemption for actuarial reviews and reports; to provide for appropriation
12	requests to cover the cost of state-mandated health insurance benefits; to provide for
13	reviews after implementation of a state-mandated health insurance benefit; to repeal
14	the Louisiana Mandated Health Benefit Commission; and to provide for related
15	matters.
16	Be it enacted by the Legislature of Louisiana:
17	Section 1. Part VII of Chapter 11 of Title 22 of the Louisiana Revised Statutes of

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1	1950, comprised of R.S. 22:2183, is hereby enacted to read as follows:
2	PART VII. LOUISIANA MANDATED HEALTH BENEFITS
3	ACTUARIAL ANALYSIS
4	§2183. Actuarial reviews of proposed healthcare legislation
5	A. On or before December 1, 2024, the department shall retain by
6	contract one or more entities that have experience in actuarial reviews and
7	healthcare policy for the purpose of performing actuarial reviews of legislative
8	proposals that may impose a new health benefit coverage mandate on health
9	benefit plans or reduce or eliminate coverage mandated under health benefit
10	plans. At least one of the contractors shall be an actuary or actuarial firm with
11	experience analyzing health insurance premiums. The contractors, under the
12	direction of the department, shall conduct actuarial reviews of legislative
13	proposals.
14	B. On or before September 1, 2024, the department shall convene a
15	public meeting to obtain input and recommendations from stakeholders
16	concerning the methodology for conducting the analysis provided for in
17	Subsection D of this Section.
18	C. A member of the legislature who requests an actuarial review of a
19	legislative proposal shall submit the request to the department no later than
20	December 1 of the year preceding the regular legislative session in which the
21	legislative proposal will be considered.
22	D. An actuarial review performed by the contractors pursuant to this
23	Section shall consider the predicted effects of the legislative proposal during the
24	five years immediately following the effective date of the legislative proposal, or
25	during another time period following the effective date of the legislative
26	proposal if such consideration is more actuarially feasible, including but not
27	limited to all of the following:
28	(1) An estimate of the number of state residents who will be directly
29	affected by the legislative proposal.

1	(2) An estimate of changes in the rates of utilization of specific healthcare
2	services that may result from the legislative proposal.
3	(3) An estimate concerning any changes in consumer cost-sharing that
4	would result from the legislative proposal.
5	(4) An estimate of any increases or decreases in premiums charged to
6	covered persons or employers for health benefit plans offered in the individual,
7	small group, and large group markets that would result from the legislative
8	proposal.
9	(5) An estimate of the out-of-pocket healthcare cost changes associated
10	with the legislative proposal.
11	(6) An estimate of the potential long-term healthcare cost changes
12	associated with the legislative proposal.
13	(7) An estimate of the amounts necessary to defray the cost of the
14	mandate for health insurance products subject to state or federal laws requiring
15	payments to defray the costs.
16	(8) Identification of any potential health benefits for individuals or
17	communities that would result from the legislative proposal.
18	(9) To the extent practicable, the social and economic impacts of the
19	legislative proposal.
20	E. An actuarial review performed pursuant to this Section shall do all of
21	the following:
22	(1) Provide the information required by Paragraph (D)(4) of this Section
23	in terms of percentage increase or decrease and in terms of per-member,
24	per-month charges.
25	(2) Provide the information required by Paragraph (D)(5) of this Section
26	in terms of dollar amounts.
27	(3) Provide the information required by Paragraph (D)(7) of this Section
28	in terms of per-member, per-month costs and monthly enrollment estimates by
29	health plan.

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1	(4) Provide, if available, information concerning who would benefit from
2	any cost changes and health benefits from the legislative proposal, as required
3	by Paragraphs (D)(3) and (5) through (8) of this Section, and any
4	disproportionate effects that the legislative proposal would have on state
5	residents, which information, if available, shall be disaggregated, at a minimum,
6	by race, ethnicity, sex, gender, and age.
7	(5) Provide, to the extent practicable, a qualitative analysis of the impact
8	of the legislative proposal. For the purposes of this Paragraph, a member of the
9	legislature who requests an actuarial review of a legislative proposal pursuant
10	to this Section may designate one or more persons to provide data to the
11	contractors in order to inform this qualitative analysis.
12	F. In performing actuarial reviews of legislative proposals, the
13	contractors may utilize data from any reasonable source, including data
14	collected from insurance carriers. Insurance carriers shall provide information
15	to, and otherwise cooperate with, the contractors and the department for
16	purposes of this Section.
17	G. A request for an actuarial review pursuant to this Section and the
18	final report resulting from the request shall be treated as confidential, except
19	the information may be used by the requesting member of the legislature or by
20	the chairmen of the Senate and House committees on insurance for the purpose
21	of coordinating selections pursuant to Subsection C of this Section, until the
22	legislative proposal that is the subject of the actuarial review is introduced in
23	the regular legislative session following submission of the request for the
24	actuarial review or, if no legislative proposal is introduced, until after the end
25	of the legislative session following the submission of the request.
26	H. Upon enactment of any legislative proposal for which a defrayal cost
27	has been estimated pursuant to Subsection D of this Section, the department
28	shall notify, in writing, the commissioner of administration and the chairmen

of the Senate Committee on Finance and House Committee on Appropriations

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1	of the estimated cost. Upon receipt of the written notification, the commissioner
2	of administration shall request an appropriation to pay the estimated defrayal
3	cost of each enacted legislative proposal prior to implementation in the
4	<u>subsequent plan year.</u>
5	I. Each year following initial implementation, the department shall
6	require insurance carriers to provide actuarial estimates, based on appropriate
7	claims and other data, of the per-member, per-month amount necessary to
8	defray the cost of the enacted mandate for the subsequent plan year. After
9	determining these estimates to be actuarially sound, the department shall notify
10	the commissioner of administration and the chairmen of the Senate Committee
11	on Finance and House Committee on Appropriations of the amounts needed to
12	defray the cost of the enacted mandates for each health plan. The commissioner
13	of administration shall request an appropriation to pay these amounts prior to
14	implementation in the subsequent plan year.
15	J. Notwithstanding any other provision of law to the contrary, the
16	department shall not engage any contractor to perform an actuarial review
17	pursuant to this Section unless the department determines that there are
18	adequate resources available within existing appropriations to compensate the
19	contractor for the actuarial review.
20	Section 2. R.S. 44:4.1(B)(11) is hereby amended and reenacted to read as follows:
21	§4.1. Exceptions
22	* * *
23	B. The legislature further recognizes that there exist exceptions, exemptions,
24	and limitations to the laws pertaining to public records throughout the revised
25	statutes and codes of this state. Therefore, the following exceptions, exemptions, and
26	limitations are hereby continued in effect by incorporation into this Chapter by
27	citation:
28	* * *
29	(11) R.S. 22:2, 14, 31, 42.1, 88, 244, 263, 265, 461, 550.7, 571, 572, 572.1,

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1	572.2, 574, 601.3, 618, 639, 691.4, 691.5, 691.6, 691.7, 691.8, 691.9, 691.9.1,
2	691.10, 691.38, 691.56, 732, 752, 753, 771, 834, 972(D), 976, 1008, 1019.2, 1203,
3	1460, 1464, 1466, 1488, 1546, 1559, 1566(D), 1644, 1656, 1657.1, 1660.7, 1723,
4	1796, 1801, 1808.3, 1927, 1929, 1983, 1984, 2036, 2045, 2056, 2085, <u>2183</u> , 2091,
5	2293, 2303, 2508
6	* * *
7	Section 3. Part VIII of Chapter 11 of Title 22 of the Louisiana Revised Statutes of
8	1950, comprised of R.S. 22:2187, is hereby repealed.

The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Brandi Cannon.

SB 368 Engrossed

DIGEST 2024 Regular Session

Bass

<u>Proposed law</u> requires, on or before Dec. 1, 2024, the Department of Insurance (LDI) to retain by contract one or more entities that have experience in actuarial reviews and healthcare policy for the purpose of performing actuarial reviews for legislative proposals that may impose a new health benefit coverage mandate on health benefit plans or reduce or eliminate coverage mandated under health benefit plans.

<u>Proposed law</u> provides that a member of the legislature who requests an actuarial review of a legislative proposal shall submit the request to LDI no later than Dec. 1 of the year preceding the regular legislative session in which the legislative proposal will be considered.

<u>Proposed law</u> provides that an actuarial review performed pursuant to <u>proposed law</u> shall consider the predicted effects of the legislative proposal during the five years immediately following the effective date of the legislative proposal, or during another time period following the effective date of the legislative proposal if such consideration is more actuarially feasible, including but not limited to specific enumerated factors.

<u>Proposed law</u> provides for the format in which the results of the actuarial review shall be reported.

<u>Proposed law</u> provides that the actuarial review shall include, to the extent practicable, a qualitative analysis of the impact of the legislative proposal. Further provides that a member of the legislature who requests an actuarial review of a legislative proposal may designate one or more persons to provide data for the review.

<u>Proposed law</u> provides for the length of time that a request for an actuarial review and the final report resulting from the request are to be treated as confidential and provides an exemption from the Public Records Law, R.S. 44:1 et seq.

<u>Proposed law</u> requires the commissioner of administration to request an appropriation to pay the estimated defrayal cost of each enacted legislative proposal.

<u>Proposed law</u> prohibits LDI from engaging any contractor to perform an actuarial review pursuant to <u>proposed law</u> unless the department determines that there are adequate resources available within existing appropriations to compensate the contractor for actuarial review.

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<u>Present law</u> creates the La. Mandated Health Benefits Commission, within the Department of Insurance, to review proposed legislation in any session of the legislature for the purpose of determining if the legislation creates a mandated health benefit that would require the state to defray the costs of the mandate. <u>Present law</u> further provides for the commission's membership, powers, duties, functions, and responsibilities.

Proposed law repeals present law.

Effective August 1, 2024.

(Amends R.S. 44:4.1(B)(11); adds R.S. 22:2183; repeals R.S. 22:2187)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the original <u>bill</u>

- 1. Makes technical changes.
- 2. Removes limitation on maximum number of proposals to be reviewed.