

Louisiana Legislature 2010

Session Final Report

June 23, 2010

The Louisiana Legislature convened the 2010 Session on March 29, 2010 and adjourned Monday, June 21st. There were more than 2,300 bills to review. Dominating issues were the budget and the oil spill in the Gulf of Mexico. Of the 2,300 bills, health care issues, many of which were significant to the health benefits industry, were addressed. LBGH tracked 18 bills which were determined to be of importance. Of the bills tracked, LBGH took a position of support on four bills, tracked twelve and opposed two. These positions were based on input by the LBGH Public Policy Workgroup, comprised of representatives of our multi-stakeholder organization. To review a copy of these bills please visit www.legis.state.la.us

House Bill 94 by Representative Talbot (participation in a health care system) –filed in response to the Obama Administration’s Patient Protection and Affordable Care Act died on the calendar. This piece of legislation would have allowed the state to retain its sovereignty and provides protection against the unprecedented intrusion of federal mandates.

House Bill 244, 280, 230 and Senate Bill 668 all addressed dependent coverage to age 26 with the exception of House Bill 280 which addressed student coverage during a medically necessary leave of absence from school. All these bills were brought to the legislature by the Department of Insurance. It was determined during testimony that the Department proposed these bills in the event the federal law, regarding dependent coverage, was not implemented. The only bill that made it through the process was House Bill 244. This bill adopted amendments to bring it in line with the Patient Protection and Affordable Care Act recently enacted by Congress. After much debate in House Insurance, the bill was recommitted to the House Appropriations Committee due to the fiscal note which projected a cost of \$4.3 to \$6.4 million for the Office of Group Benefits. The bill was discharged from Appropriations and once on the House Floor, the House amended the Office of Group Benefits from the bill. It was noted that the Office of Group Benefits may have been amended out of the bill, but would still have to comply with the federal law. House Bill 244 has been sent to the Governor.

House Bill 511 by Representative Harrison (combined medical billing) – this bill would have required consolidated billings of all services provided while in the hospital. After debate from the Louisiana Hospital Association, Louisiana Medical Society and Acadiana Computer Systems, a physician billing service, the bill was deferred with no objection.

House Bill 821 by Representative Kleckley (wellness programs) – this bill authorizes a health insurance issuer to offer a voluntary wellness or health improvement program that allows for rewards or incentives including merchandise, gift cards, debit cards, premium discounts or rebates, contributions towards a member's health savings account, modifications to copayment, deductible, or coinsurance amounts, or any combination of these incentives to encourage participation or to reward for participation in the voluntary wellness program. House Bill 821 has been sent to the Governor.

House Bill 822 by Representative Cortez (assignment of benefits to emergency service providers) – this bill would have authorized a health care provider that does not contract with a health insurance issuer to file a claim with a health plan for emergency services. It also would have required the health plan to directly pay the claim by a non-contracted provider in the amount of the provider's usual and customary charges emergency services, less any coinsurance, copayments, deductibles, non-covered services, or any other amounts identified by the health plan as an amount for which the insured is liable. The bill specified that payment of the claim by the health plan in no circumstances be made directly to the patient, insured, or enrollee. After much debate this bill failed in committee.

House Bill 1094 by Representative Roy (retroactive cancellation) – the bill would have established and standardized rules for cancellation of any type of policy or agreement to provide health and accident coverage and allow penalties for any cancellation. This bill also allowed for cancellation notices to go to all enrolled in a plan. The bill was deferred multiple times and finally turned into a study resolution by the author. This issue is addressed in PPACA in which insurance companies are not allowed to rescind policies with the exception of fraud.

House Bill 1196 by Representative Carter (review of mandated benefits) – would have allowed prospective and retrospective review of mandated health insurance benefits. This review would include an impact report by the Legislative Fiscal Office of the financial, social, and medical impacts of the mandated benefit. This bill, sponsored by the Baton Rouge Chamber of Commerce, failed in Committee.

House Bill 1246 by Representative McVea (contracts with dental providers) – this bill brought forth by the Louisiana Dental Association, amended in Committee, will allow dentist to choose to accept contracts that may or may not include a discount for non covered services. The debate focused on dentists being forced to accept contracts that made them discount non covered services in order to get business and/or build their practice. The bill has gone to the Governor.

Senate Bill 26 by Senator Crowe (Louisiana Health Care Freedom Act) – is another bill allowing Louisiana to opt out of the Patient Protection and Affordable Care Act. This bill made it to Senate Finance where it stayed.

Senate Bill 125 by Senator Adley (balance billing) – this bill would have required the contract between the health plan and the health care facility to include a provision that required the facility based physician to accept the contracted reimbursement rate of the health plan, even if

not in network. It also prohibited the facility based physician from discount billing, dual billing, in excess of the contracted reimbursement rate and required the collection of co-payments, deductibles, coinsurance, non-covered health care services or other amounts identified as the liability of the enrollee or insured. This bill was withdrawn from the Senate files by the author.

Senate Bill 349 by Senator Lafleur (balance billing) – this bill would have required a health plan pay out of network physicians (radiologists, anesthesiologists, pathologists and emergency medicine doctors) amounts set by the commissioner of insurance. After much debate, this bill failed in Committee.

Senate Bill 543 by Senator Morrish (Louisiana Mandated Health Benefits Commission) - this bill creates the Louisiana Mandated Health Benefits Commission which would review all proposed legislation that would mandate coverage by health plans of specific benefits, services, conditions, or medical products. An annual report of findings and recommendations, if any, on mandated benefits proposed to the legislature would include the medical, social and financial impact. Senate Bill 543 has been sent to the Governor.

Senate Bill 732 by Senator Hebert (balance billing disclosure) – this bill is the consensus bill resulting from many, many meetings regarding balance billing by facility based physicians. The bill requires disclosure by health plans, facilities, producers and physicians for written disclosure confirming whether the facility is a participating provider contracted with the insured's health plan and allows for a list, upon request of the insured, that contains the name and contact information for each individual or group of hospital-contracted physicians. This listing is to be made available on the facility website as well. The disclosure also requires informing the insured that they may request information from their health plan for any amounts not paid by the health insurance issuer. The facility-based physician will be required to bill the patient who has health insurance coverage that does not have a contract with the facility-based physician and to send to include an itemized list of the services and supplies provided as well as the dates of these services. The disclosure also requires the amount owed by the insured, a telephone number to call to discuss the statement and language clearly displayed on the front of the bill stating that it is a bill and that based on information from the health plan, the amount shown is owed by the enrollee or insured. The bill has been sent to the Governor.

Other:

On April 13, 2010 LBGH co-sponsored Obesity Awareness Day at the Legislature. A [Resolution](#) was read on the floor asking the House and Senate members to recognize April 13th as Obesity Awareness Day as well as challenging each legislator to host a "walk" in their district prior to the session next year. A luncheon was also held for legislators and organizations were given the opportunity to discuss what is being done regarding obesity awareness. Thank you to all the organizations who supported this event each year, Johnson & Johnson, American Heart, Louisiana Diabetes Association, the Pennington BioMedical Research Center and many others .