This report is a summary of legislative activity for the 2023 Regular Legislative Session performed for the Louisiana Chapter of the American Academy of Pediatrics
2022 Priorities

The 2022 Regular Session began with generous budgetary forecasts and a surplus. This allowed the Chapter to focus on other imminent policy concerns. Those included:

- Scope of Practice
- Care Access

The key bills from each of those categories will be broken down on later pages to highlight legislation, stances and outcomes from this session.

Elly@seersuckerstrategies.com

Stephen@seersuckerstrategies.com
Scope of Practice

- **HB 471**

HB 471 by Rep. Freiberg lowers the age in which a pharmacist, pharmacist tech and pharmacist intern could give an ACIP immunization from age 17 to age 7.

Position: Opposed
Outcome: Failed
Care Access

• HB 677
SB 677 by Rep. Jordan requires a health coverage plan to limit an enrollee's cost-sharing amount to $75.00 for a 30-day prescription of insulin.

Position: Supported
Outcome: Passed

• HB 107
HB 107 by Rep. Turner Changes the local sales and use tax exemption for procurement or administration of certain prescription drugs by a physician's office, infusion clinic, or other outpatient clinic from an optional exemption to a mandatory exemption

Position: Support
Outcome: Failed
Care Access

• HB 419

HB 419 by Rep. Johnson requires a health coverage plan delivered in this state that provides mental health and substance abuse benefits to provide coverage for mental health and substance abuse services delivered through evidence-based, integrated behavioral healthcare models, such as the Psychiatric Collaborative Care Model. (Private Pay Passed Last Year - This Would have Added Medicaid)

Position: Supported
Outcome: Failed

• HB 648

HB 648 by Rep. Firment prohibits any physician or other medical healthcare professional from performing any gender transition procedures on any person under 18 years of age or referring any person under 18 years of age to any medical doctor for gender transition procedures.

Position: Opposed
Outcome: Passed (Veto Expected)
Care Access

**• SB 104**

SB 104 by Sen. Stine outlines legislative findings and requires any health coverage plan renewed, delivered, or issued for delivery in this state to include coverage for biomarker testing for the purpose of the diagnosis, treatment, appropriate management, or ongoing monitoring of an individual's disease or condition when the test provides clinical utility as demonstrated by medical and scientific evidence.

Position: Supported
Outcome: Passed

**• SB 188**

SB 188 by Sen. Stine requires health insurance issuers to submit an annual report that provides a quarterly breakdown that includes a list of all services that require a prior authorization.

Position: Supported
Outcome: Passed
Care Access

- **HB 468**
  HB 468 by Rep. Pressly authorizes a provider to submit a request for utilization review for any service to an issuer at any time, including outside normal business hours. Requires an issuer to notify the provider of the specific clinical review criteria to be used for the specific item or service in its utilization review determination within 72 hours of receiving either an oral or written request from a provider.

  Position: Supported
  Outcome: Passed

- **SR 101**
  Urges and requests the Centers for Disease Control and Prevention to include monoclonal antibodies for RSV within the federal Vaccines for Children program.

  Position: Supported
  Outcome: Passed
Care Access

• HB 643
HB 468 by Rep. Horton requires a healthcare provider attending a newborn child to administer appropriate testing for the cytomegalovirus if the newborn fails the newborn hearing screen and, in the exercise of professional judgment, the healthcare provider believes that the testing would be in the best interest of the newborn.

Position: Supported as Amended
Outcome: Passed

• HB 200
removes the specific list of conditions provided in present law and instead requires LDH to promulgate a list of genetic or other congenital conditions in administrative rule for which a newborn child should be tested.

Position: Supported
Outcome: Passed
The Louisiana Department of Health has not currently determined what the $100 million state funding reduction in the agency’s budget might mean for state health care, though it is expected to balloon and could possibly affect low-income residents’ access to medical services.

The impact of the reduction has the potential to grow to $500 million because the state uses its health care money to draw down more federal funding, advocates and the governor implied.

The legislators’ health plan also directs the state to reduce some of the spending in one specific way. Of the $100 million reduction, $22 million must come from funding for the state’s Medicaid disenrollment efforts.

Elly@seersuckerstrategies.com

Stephen@seersuckerstrategies.com