

INSTRUCTION SHEET FOR MANDATE STUDY

Enclosed please find charts designed to determine the actual costs (net costs) associated with mandatory health benefits in the State of Louisiana. The Louisiana Department of Insurance has been charged with the duty of compiling statistical data and interpreting its conclusions to prepare a report to the Louisiana legislature.

House Concurrent Resolution No. 131 by Roy, et al requested that the Department of Insurance conduct a study on statutorily mandated health insurance benefits to determine what each mandate costs in terms of absolute dollars and as a percentage of total health insurance premiums. The study will also review and compare the statutory mandates of Louisiana with other states to determine whether the mandates in Louisiana are voluntarily offered or are mandated as in Louisiana. Finally, the study will survey the health insurance industry to identify long-term cost savings associated with a preventative care mandate as opposed to the long-term cost of the disease if the mandate did not exist.

DEFINITIONS

- A. **“Dollar Amount” means the “net costs of treatment” paid by the health insurance issuer.**
- B. **“Insured(s)” means both an insured and/or an enrollee.**
- C. **“Other” refers to any other CPT code utilized by a health provider in the treatment of any of the statutory mandated health benefits.**
- D. **“Year” means the year in which the claims payment date occurred.**

PART I

Costs Associated with Mandated Health Benefits

- I. Please complete the attached charts detailing the actual dollar amount paid by CPT code and year.

Please note: the actual dollar costs spread sheet is named MANDATE-COST.

- II. Please provide the total premium cost for any policy/plan you issue that includes all mandated health insurance benefits.

Please note: the percentage of premium attributable to the mandate spread sheet is named MANDATE-PREMIUM-PCT

- III. Please detail the actual cost included in the total premium cost attributed to each mandated benefit.
- IV. Please provide your total book of business for health insurance.
- V. Please provide the percentage of your total book of business that is affected by the mandatory health insurance benefits.
- VI. Please provide the total number of insureds covered by any health insurance policy/plans that you issue
- VII. Please provide the percentage of insureds covered by any policy/plan that you issue that includes all mandated health insurance benefits.
- VII. Please provide the total number of insureds covered by any policy/plan that you issue that includes all mandated health insurance benefits who actually use the mandated health insurance benefits

Please note: the number of patients who exercise a mandate spread sheet is named MANDATE-PATIENTS

- IX. For each mandate listed, please provide the number of policies/plans that are NOT required to offer the mandated health benefit that actually offer the mandated benefit.

PART II

Costs Associated with Treatment of Disease

- I. Please complete the attached charts detailing the actual dollar amount paid by CPT/Diagnosis code and year for each listed disease.

Please note: the actual dollar amount paid for the disease spreadsheet is named DISEASE-COST

- A. Complications due to the presence of an untreated cleft lip
- B. Complications due to the presence of an untreated cleft palate
- C. Breast Cancer
- D. Ovarian Cancer

- E. Cervical Cancer
- F. Prostate Cancer
- G. Colorectal Cancer

- II. Please provide the number of insureds covered by any policy/plan that you issue that includes all mandated health insurance benefits who have contracted the listed disease.
- III. Please provide the number of insureds who are NOT covered by the mandates who have contracted the listed disease.
- IV. Please provide the number of insureds covered by any policy/plan that you issue that includes all mandated health insurance benefits who have contracted the listed disease but did NOT use the mandated benefit intended to prevent and/or detect the listed disease.