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Public policy in pharmacy practice

On agenda / Returned to calendar, subject to call / **Deferred (Vol/Invol)** *Last update: 06-25-2026 @ 1800*

HOUSE

Pending Referral

HB:

SB:

ACRJ HB: 404, 778
HCR-6 / Wed-Thu V/5-6 I/5-19

APP HB: 709
HCR-5 / Mon-Tue

CLP HB: 984
HCR-4 / Mon-Tue

COM HB: 230, 791
HCR-1 / Mon-Tue

EDUC HB: 737
HCR-1 / Wed-Thu I/4-15

H&W HB: 184, 197, 277, 373, 948, 1093, 1114, 1121, 1143, 1227
HCR-5 / Wed-Thu V/3-24 V/4-23 V/4-29 V/4-14 V/5-6

SB: 483

HGA HB: 627
HCR-2 / Wed-Thu V/4-1

INS HB: 452
HCR-3 / Wed-Thu V/4-15

LIR HB: 1047
HCR-5 / Fri V/5-7

Floor:

HB:

HCR: 071
5-11

SB:

SENATE

Pending Referral

SB:

HB:

H&W **SB: 036, 413, 434, 516**
Room H / Wed 1/3-18 V/4-22 V/4-15

HB: 469, 1216, 1217
I/5-20 I/5-20

INS **SB:**
Room A-B / Wed

HB: 919
V/4-28

SGA **SB:**
Room F / Wed

HB: 615
I/5-27

Floor: **SB:**

HB:

Concurrence: **HB:**

SB:

Conference: **HB:** 1220

SB:

Passed: Act # 058 183 286 305 329 557 567 573 649 707 814 867 879
HB: 152, 907, 106, 568, 962, 557, 779, 930, 475, 1155, 578, 1049, 1160

HR: 174

HCR: 120

Act # 252 345 374 453 486 602 735 749 915 956
SB: 195, 030, 253, 045, 304, 270, 057, 250, 401, 043

SCR: 002, 037

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Public policy in pharmacy practice

Regular Session of the 2026 Louisiana Legislature
Convened March 9, 2026 @ 12 Noon – Adjourned June 1, 2026 @ 6:00 p.m.

Final Legislative Report ~ 06-25-2027

Last Items Reviewed							
HB	1,259	HR	410	HCR	120	HSR	2
SB	525	SR	211	SCR	89	SSR	0
Total = 2,616				Items on Watch List = 59			

House of Representatives

Bills

HB 106 V. Cox, III [R-85], Gretna Administration of Criminal Justice
Prohibits day care facilities from providing a child with melatonin without parental approval. [08-01-2026]

02-09-2026 Prefiled and referred to committee.
03-24-2026 Amended, then reported favorably.
03-25-2026 Adopted committee amendments; bill engrossed;
passed to 3rd reading and floor vote.
03-30-2026 Amended, then passed the House (87-5); sent to the Senate.
03-31-2026 Received in the Senate; committee referral pending.
04-01-2026 Referred to the Senate Committee on Judiciary-C.
05-05-2026 Reported favorably.
05-06-2026 Referred to Legislative Bureau.
05-07-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-13-2026 Passed the Senate (32-0); returned to the House.
05-18-2026 Received from the Senate without amendments;
Enrolled; signed by House Speaker and Senate President.
05-19-2026 Sent to Governor for executive approval.
05-22-2026 Signed by Governor as **Act No. 286**; effective 08-01-2026.

This bill seeks to amend the criminal code, within the chapter relative to health of minors, to add a new law prohibiting day care facilities from providing a child with melatonin without parental approval. The bill provides criminal penalties for violations. House Committee Amendment No. 2186 expanded the bill to include any person in any setting who may not provide melatonin to a child without parental consent. House Floor Amendment No. 2106 added a requirement for parental consent to be written in form.

[HB 152](#) S. Mack [R-95], Livingston Administration of Criminal Justice
Adds certain substances to the Uniform Controlled Dangerous Substances Law.
[08-01-2026]

02-13-2026 Prefiled and referred to committee.
03-24-2026 Reported favorably.
03-25-2026 Bill engrossed; passed to 3rd reading and floor vote.
03-30-2026 Passed the House (97-0); sent to the Senate;
Received in the Senate: committee referral pending.
03-31-2026 Referred to Senate Committee on Judiciary-C.
04-14-2026 Reported favorably.
04-15-2026 Referred to the Legislative Bureau.
04-20-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
04-27-2026 Passed Senate (36-0); returned to the House.
04-28-2026 Received from the Senate without amendment.
04-29-2026 Enrolled; signed by House Speaker.
05-04-2026 Signed by Senate President.
05-05-2026 Sent to Governor for executive approval.
05-11-2026 Signed by Governor as **Act No. 58**; effective 08-01-2026.

This bill seeks to add eight opiates to Schedule I of the state's list of controlled substances, consistent with their addition to the federal list of controlled substances.

[HB 184](#) M. Melerine [R-6], Shreveport Health & Welfare
Provides an exemption to certain outpatient prescription fees for charitable pharmacies.
[08-01-2026]

02-18-2026 Prefiled and referred to committee.
03-24-2026 Voluntarily deferred indefinitely.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the state Medicaid law to provide charitable pharmacies with an exemption to the ten-cent fee per outpatient prescription paid to Medicaid by all pharmacies.

[HB 197](#) J. Domangue [R-53], Houma Health & Welfare
Provides for the use of artificial intelligence by healthcare providers. [08-01-2026]

02-18-2026 Prefiled and referred to committee.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the introductory chapter of Title 37; this part of state law contains the licensing laws for all healthcare providers in the state. The bill authorizes the use of artificial intelligence (AI) for 6 specifically listed activities and prohibits the use of AI for 3 specifically listed activities. The bill authorizes the state health department to assess a civil penalty up to \$10,000 per violation, and further, to refer the violator to their professional licensing board. Finally, the bill requires the state health department to promulgate rules to implement the new law.

[HB 230](#) M. Baham [R-103], Chalmette Commerce
Provides for disclosure of artificial intelligence-generated content. [08-01-2026]

02-19-2026 Prefiled and referred to committee.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the state commerce law to establish new law requiring the disclosure of AI-generated content. When the AI system produces images, audio, video or multimedia content, there shall be conspicuous disclosure of its generation by AI. The bill declares violations to be deceptive and unfair trade practices and authorizes the state attorney general to enforce the law and collect civil penalties up to \$10,000 per violation.

HB 277 D. Bamburg [R-5], Bossier City Health & Welfare
Requires educational or marketing materials for prescription drugs directed to healthcare providers to include price information. [08-01-2026]
02-23-2026 Prefiled and referred to committee.
03-24-2026 Removed from agenda prior to meeting.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to enact a new part of the state public health law relative to the disclosure of price information for prescription drugs. The law requires any person providing educational or marketing materials for prescription drugs to healthcare providers with the intent for the provider to prescribe such drugs for his patients shall include price information for the drug and further to disclose if there is a biosimilar or generic drug available for the same medical condition. The bill includes some specific price information requirements. The bill also declares violations of this new law prohibited under the state's Unfair Trade Practices and Consumer Protection Law .

HB 373 C. Newell [D-99], New Orleans Health & Welfare
Provides for the Louisiana Cannabis Pilot Program. [08-01-2026]
02-25-2026 Prefiled and referred to committee.
04-01-2026 Removed from agenda prior to meeting.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the state therapeutic marijuana law to establish a state cannabis pilot program. The bill would allow the current marijuana retailers to sell marijuana for adult use only through the system currently used for therapeutic marijuana. The bill limits the duration of the pilot program to three years.

HB 404 T. Chassion [D-44], Lafayette Administration of Criminal Justice
Provides for medication-assisted treatment for substance abuse in jails and prisons. [08-01-2026]
02-25-2026 Prefiled and referred to committee.
05-06-2026 Voluntarily deferred indefinitely, in lieu of study resolution.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the criminal procedure laws to establish a medication-assisted treatment program for substance abuse for people incarcerated in jails and prisons. The bill requires the state department of public safety and corrections to collaborate with the state health department and the state sheriff's association to administer the program with participation from persons licensed by the state medical board and state nursing

board with prescriptive authority for medications used substance abuse treatment.

HB 452 B. Amedee [R-51], Houma Insurance
Prohibits financial incentives or penalties to encourage healthcare providers to administer vaccinations. *[08-01-2026]*

02-26-2026 Prefiled and referred to committee.
04-15-2026 Presented, then voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the insurance law to prohibit a health coverage plan from paying or offering to pay any healthcare provider an incentive, bonus or other amount beyond contracted reimbursement rate with the intent to encourage the healthcare provider to administer any vaccination. The bill also prohibits a plan from denying or refusing to reimburse any claim for a covered service or imposing any other penalty on a healthcare provider with the intent to encourage the provider to administer any vaccination.

HB 469 E. Jordan [D-29], Baton Rouge Health & Welfare
Provides relative to the pharmacy education support fee collected by the Louisiana Board of Pharmacy. *[08-01-2026]*

02-26-2026 Prefiled and referred to committee.
03-18-2026 Reported favorably.
03-23-2026 Bill engrossed; passed to 3rd reading and floor vote.
03-25-2026 Passed the House (98-0); sent to the Senate;
Received in the Senate; committee referral pending.
03-30-2026 Referred to the Senate Committee on Health & Welfare.
05-20-2026 Involuntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the pharmacy practice law, more specifically the renewal fees for pharmacists and pharmacies. That law currently requires the Board to collect a \$100 pharmacy education support fee every year on each renewal of a pharmacist license or pharmacy permit, with an option for the licensee to decline to pay that fee. The board is required to remit all such fees collected to ULM College of Pharmacy. This bill seeks to add Xavier College of Pharmacy as an eligible recipient of such fees, with a licensee having an option which school is to receive the fee they pay.

HB 475 S. Berault [R-76], Slidell Health & Welfare
Requires a healthcare provider to obtain a patient's consent prior to recording a medical visit. *[08-01-2026]*

02-26-2026 Prefiled and referred to committee.
04-08-2026 Amended, then reported favorably.
04-09-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-14-2026 Passed House (97-0); sent to the Senate;
Received in the Senate; committee referral pending.
04-15-2026 Referred to the Senate Committee on Health & Welfare.
05-06-2026 Reported favorably.
05-07-2026 Referred to Legislative Bureau.

05-11-2026 Reported without Bureau amendment;
Passed to 3rd reading and final passage.
05-18-2026 Amended, then passed Senate (35-0); returned to the House.
05-19-2026 Received in the House with Senate amendments.
05-20-2026 Pending House concurrence with Senate amendments.
05-26-2026 House concurred with Senate amendments (99-0).
05-27-2026 Enrolled; signed by House Speaker and Senate President.
05-28-2026 Sent to Governor for executive approval.
06-02-2026 Signed by Governor as **Act No. 649**; effective 08-01-2026.

This bill seeks to amend the introductory part of Title 37, which includes all the healthcare provider practice acts. This bill seeks to require every licensed healthcare provider to obtain a patient's verbal consent prior to recording any part of an appointment or treatment to be transcribed by artificial intelligence. [House Committee Amendment No. 3301](#) changed the requirement to obtain the patient's consent to a requirement to disclose the recording to the patient prior to beginning. [Senate Floor Amendment No. 3997](#) added a penalty provision, subjecting healthcare professionals to disciplinary action by their licensing board for violations of this requirement.

HB 557 J. DeWitt [R-25], Tioga Health & Welfare
Provides relative to long-term care pharmacy. [08-01-2026]
03-24-2026 Amended, then reported favorably.
03-25-2026 Adopted committee amendments; bill engrossed;
Passed to 3rd reading and floor vote.
03-30-2026 Passed the House (101-0); sent to the Senate;
Received in the Senate; committee referral pending.
03-31-2026 Referred to the Senate Committee on Health & Welfare.
05-13-2026 Reported favorably.
05-14-2026 Referred to Legislative Bureau.
05-18-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-21-2026 Passed the Senate (33-0); returned to the House.
05-25-2026 Received from the Senate without amendments;
Enrolled; signed by House Speaker and Senate President.
05-26-2026 Sent to Governor for executive approval.
05-29-2026 Signed by Governor as **Act No. 557**; effective 08-01-2026.

This bill seeks to add a new Part VIII to the pharmacy practice act relative to long-term care pharmacy. The bill defines a long-term care pharmacy as one serving residents of a long-term care facility as defined in the Older Americans Act [42 USC 3002(35)] and has an NPI associated with taxonomy code 3336L0003X. [House Committee Amendment No. 2275](#) made two technical non-substantive changes.

HB 568 G. Firment [R-22], Pollock Administration of Criminal Justice
Provides relative to penalty enhancements for violations of drug-free zones.
[08-01-2026]
02-26-2026 Prefiled and referred to committee.
04-15-2026 Reported favorably.
04-16-2026 Bill engrossed; passed to 3rd reading and floor vote.

04-22-2026 Amended, then passed House (59-34); bill re-engrossed;
Sent to the Senate.
04-27-2026 Received in the Senate; committee referral pending.
04-28-2026 Referred to the Senate Committee on Judiciary-B.
05-05-2026 Reported favorably.
05-06-2026 Referred to Legislative Bureau.
05-07-2026 Reported without Bureau amendment;
Passed to 3rd reading and final passage.
05-18-2026 Passed Senate (25-10); returned to the House.
05-19-2026 Received in the House without Senate amendments;
Enrolled; signed by House Speaker and Senate President;
Sent to Governor for executive approval.
05-22-2026 Signed by Governor as **Act No. 305**; effective 08-01-2026.

This bill seeks to amend the controlled substance law, more specifically the provisions relating to violations of controlled substance laws within drug-free zones. The bill seeks to increase the current penalties for violations of controlled substance laws while smoking, vaping, or otherwise abusing any controlled substance while on any property used for school purposes by any school, within 2,000 feet of such property, or while on a school bus. The enhanced penalty provides for incarceration of not more than one year and a fine of not more than one thousand dollars. [House Floor Amendment No. 4289](#) made a technical correction.

HB 578 M. Johnson [R-27], Pineville Civil Law & Procedure
Provides for the Restoring Biological Truth Act. [08-01-2026]

02-26-2026 Prefiled and referred to committee.
04-22-2026 Amended, then reported favorably.
04-23-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-28-2026 Amended, then passed House (73-21); bill re-engrossed;
sent to the Senate.
04-29-2026 Received in the Senate; committee referral pending.
05-05-2026 Referred to the Senate Committee on Judiciary-A.
05-12-2026 Reported favorably.
05-13-2026 Referred to Legislative Bureau.
05-14-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-21-2026 Amended, then passed the Senate (27-8);
Returned to the House.
05-25-2026 Received from the Senate with amendments.
05-27-2026 House concurred with Senate amendments (77-23).
05-28-2026 Enrolled; signed by House Speaker and Senate President.
06-01-2026 Sent to Governor for executive approval.
06-08-2026 Signed by Governor as **Act No. 814**; effective 08-01-2026.

This 59-page bill seeks to change all references in law as well as civil and criminal codes, relative to personally identifiable information of an individual, from “gender” to “sex.” The bill also defines “sex” as an individual’s biological sex as observed or clinically certified at birth. Among a long list of laws proposed for amendment, within the

section of pharmacy law relating to membership of the pharmacy board, the term “sex” is to be substituted for the current term “gender.” [House Committee Amendment No. 4153](#) made two technical amendments. [House Floor Amendment No. 4626](#) made 18 sets of technical amendments. [Senate Floor Amendment No. 3797](#) made technical corrections to certain citations.

[HB 615](#) M. Johnson [R-27], Pineville House & Governmental Affairs
Requires certain public meetings to be broadcast live. [08-01-2026]
02-26-2026 Prefiled and referred to committee.
04-01-2026 Amended, then reported favorably.
04-07-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-09-2026 Called for debate; returned to the calendar, subject to call.
04-15-2026 Notice given; scheduled for debate on 04-22-2026.
04-22-2026 Amended, then passed House (97-0); bill re-engrossed;
Sent to the Senate.
04-27-2026 Received in the Senate; committee referral pending.
04-28-2026 Referred to the Committee on Senate & Governmental Affairs.
05-27-2026 Voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the open meetings law, for the purpose increasing the number of public agencies required to broadcast their meetings. New additions to the list include those agencies authorized to promulgate rules and regulations as well as agencies authorized to levy fees or fines. Those criteria will require the licensing boards to broadcast their meetings, except for any portion conducted in executive session. [House Committee Amendment No. 3018](#) clarified the broadcast requirement to be a video broadcast. [House Floor Amendment No. 4276](#) made two amendments. The first inserted an exemption from the broadcast requirement for taxing districts with less than 25,000 people, and the second authorized agencies broadcasting their meetings to archive their video files on social media platforms as an alternative to their own websites.

[HB 627](#) A. Knox [D-93], New Orleans House & Governmental Affairs
Provides relative to live-stream video and recording of the public meetings of entities created by law. [08-01-2026]
02-27-2026 Prefiled and referred to committee.
04-01-2026 Voluntarily deferred indefinitely.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the open meetings law, for the purpose of increasing the number of public agencies required to broadcast their meetings. This bill seeks to require every public agency created by law to broadcast their meetings except for any portion conducted in executive session.

[HB 709](#) M. Wright [R-77], Covington House & Governmental Affairs
Provides relative to the promulgation of rules pursuant to the Administrative Procedure Act. [08-01-2026]
02-27-2026 Prefiled and referred to committee.

04-01-2026 Removed from agenda prior to meeting.
 05-06-2026 Amended, then reported favorably.
 05-07-2026 Committee amendments adopted; bill engrossed;
 Recommitted to House Committee on Appropriations.
 06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the administrative procedure act, which is the law governing rulemaking activity by all public agencies. The bill requires any agency proposing a new rule to identify the two rules it will repeal. In addition, the bill attaches an expiration date of every rule adopted: June 30 of the following year, unless legislation is enacted to continue the rule until a date certain or indefinitely. Finally, the bill changes the duty of legislative oversight committees on holding hearings on proposed rules, from “may” to “shall.” [House Committee Amendment No. 5119](#) made substantial changes to the original bill. The requirement to identify two rules to repeal when proposing a new rule was removed. A new office of information and regulatory affairs is to be established in the governor’s office for the purpose of reviewing proposed rules to ensure appropriate coordination with other state agencies. The secretary of state is charged with establishing an email notification system for all businesses to inform them of proposed rulemaking activities. The amendment retains the requirement for legislative oversight committees to conduct a public hearing on all proposed rules. Finally, the amendment places a 10-year expiration date on all promulgated rules, with the agency permitted to renew the rule in either its original or revised form. The amended bill was recommitted to the House Committee on Appropriations to consider the fiscal note of the amended bill.

[HB 737](#) B. Amedee [R-51], Houma Education
 Provides relative to the requirement that certain students present evidence of immunization against meningococcal disease as a condition of school entry.
 [08-01-2026]

02-27-2026 Prefiled and referred to committee.
 04-15-2026 Involuntarily deferred (4-8).
 06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the education law, and more specifically the current law requiring any student entering any school (daycare through college) to present evidence of immunization against any vaccine-preventable disease according to a schedule developed by the state health department. That law prescribes the minimum content of that schedule and includes meningococcal disease. The bill removes meningococcal disease from that list, and further, removes all other provisions requiring evidence of immunization against meningococcal disease as a condition of entry into any school.

[HB 778](#) B. Amedee [R-51], Houma Administration of Criminal Justice
 Provides with respect to the possession of kratom. [08-01-2026]

02-27-2026 Prefiled and referred to committee.
 05-19-2026 Involuntarily deferred in committee.
 06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the controlled substance law, more specifically, the new restriction on kratom enacted during the 2025 legislative session which placed all

kratom products in Schedule I of the state list of controlled substances. The bill amends the Schedule I entry to synthesized, semi-synthesized, or synthetic-like compounds of 7-hydroxymitragynine and mitragynine. The bill also re-writes the entire section relative to kratom products, providing penalties for unlawful possession of the synthesized, semi-synthesized, or synthetic kratom products. In addition, the bill places serving-size limits on the natural kratom products.

HB 779 A. Freeman [D-98], New Orleans Health & Welfare
Provides relative to expedited partner therapy. [08-01-2026]
02-27-2026 Prefiled and referred to committee.
03-18-2026 Amended, then reported favorably.
03-23-2026 Adopted committee amendments; bill engrossed;
 Passed to 3rd reading and floor vote.
03-25-2026 Passed House (99-0); sent to the Senate;
 Received in the Senate; committee referral pending.
03-30-2026 Referred to the Senate Committee on Health & Welfare.
05-13-2026 Reported favorably.
05-14-2026 Referred to Legislative Bureau.
05-18-2026 Reported without Bureau amendments;
 Passed to 3rd reading and final passage.
05-21-2026 Passed the Senate (35-0); returned to the House.
05-25-2026 Received from the Senate without amendments;
 Enrolled; signed by House Speaker and Senate President.
05-26-2026 Sent to Governor for executive approval.
05-29-2026 Signed by Governor as **Act No. 567**; effective 08-01-2026.

This bill seeks to amend the expedited partner therapy law. The current law limits expedited partner therapy to people exposed to gonorrhea or chlamydia. The bill extends eligibility to people exposed to trichomoniasis or other sexually associated infections as determined by the state health department. The bill requires the health department to create a list of sexually associated infections that are eligible for expedited partner therapy. Pharmacists who reasonably and in good faith dispense drugs in accordance with this law shall not be subject to criminal or civil liability or be deemed to have engaged in unprofessional conduct. House Committee Amendment No. 1733 inserted technical amendments that are not substantive in nature.

HB 791 D. Boyd [D-102], New Orleans Commerce
Provides relative to the regulation of artificial intelligence. [08-01-2026]
02-27-2026 Prefiled and referred to committee.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the trade and commerce laws, to enact a new chapter of law regulating the use of artificial intelligence (AI). The bill provides for the regulation of AI chatbots and chatbot providers related to the use, sale, or dissemination of input data and output data, use of chatbots by minors, required disclosures to users of chatbots, transparency provisions, and a requirement to implement data safety programs.

HB 907 D. Miller [D-40], Opelousas Health & Welfare
Provides civil and criminal immunity for the distribution or use of naloxone and other

opioid antagonists beyond their shelf-life end date. *[gov. sig.]*

02-27-2026 Prefiled and referred to committee.
03-25-2026 Amended, then reported favorably.
03-26-2026 Adopted committee amendments; bill engrossed;
Passed to 3rd reading and floor vote.
04-01-2026 Passed the House (96-0); sent to the Senate;
Received in the Senate; committee referral pending.
04-07-2026 Referred to the Senate Committee on Health & Welfare.
04-22-2026 Reported favorably.
04-27-2026 Referred to the Legislative Bureau.
04-28-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-11-2026 Passed the Senate (35-0); returned to the House;
Received in the House without Senate amendments.
05-12-2026 Enrolled; signed by House Speaker and Senate President.
05-13-2026 Sent to the Governor for executive approval.
05-15-2026 Signed by Governor as **Act No. 183**; effective 05-15-2026.

This bill seeks to enact a new section of law relative to the use of naloxone and other opioid antagonists beyond their shelf-life end date. A person who prescribes, dispenses, distributes or furnishes such drugs shall not be subject to civil or criminal liability solely on the basis that any labeled shelf-life end date has passed, except in the case of gross negligence or willful or wanton misconduct. State-licensed practitioners shall not be subject to disciplinary action from their licensing board for actions in compliance with this law. However, federally certified healthcare providers, entities and facilities shall comply with federal rules prohibiting such use of products beyond their shelf-life end dates. [House Committee Amendment No. 1478](#) inserted a technical non-substantive change.

HB 919 M. Echols [R-14], Monroe Health & Welfare
Provides relative to pharmacy benefit managers. *[various dates; see Act]*

02-27-2026 Prefiled and referred to committee.
03-18-2026 Amended, then reported favorably.
03-23-2026 Adopted committee amendments; bill engrossed;
Passed to 3rd reading and floor vote.
03-25-2026 Called by title; returned to the calendar, subject to call;
Notice given for consideration on 03-30-2026.
03-30-2026 Amended, then passed the House (80-16); bill reengrossed;
Sent to the Senate.
03-31-2026 Received in the Senate; committee referral pending.
04-01-2026 Referred to the Senate Committee on Insurance.
04-28-2026 Presented, then voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the insurance law and public health law, more specifically sections within those laws relative to pharmacy benefit managers (PBMs). With respect to the public health law related to PBMs, the bill clarifies the fiduciary duties owed by PBMs, and further, requires the reporting of certain confidential information relative to financial terms and arrangements between the PBM and drug manufacturers and

labelers. Finally, the bill added another entry to the list of unfair and deceptive trade practices prohibited by that law: operating a pharmacy that is wholly or partially owned or contracted by a PBM or its subsidiaries. [House Committee Amendment No. 2003](#) inserted 22 sets of amendments into the bill, most of which were technical in nature. Substantive amendments included a limitation that the \$12 dispensing fee is only applicable to independent pharmacies located within the state, a provision that a failure of a PBM to perform the duties enumerated in the bill would be a violation of the state's Unfair Trade Practices Law, for which a maximum fine of \$10,000 could be assessed, and the removal of the provision that prohibited a PBM from operating a pharmacy wholly or partially owned by the PBM. [House Floor Amendment No. 2339](#) inserted 10 sets of amendments, four of which are substantive: the dispensing fee of \$12 was replaced by the Medicaid dispensing fee (currently, \$11.81); the criminal penalties for non-compliance were removed; the \$10,000 cap on fines for violations of the Unfair Trade Practices Law was removed; and multiple effective dates in the bill was changed to January 1, 2027.

[HB 930](#) K. Coates [R-73], Ponchatoula Health & Welfare
Eliminates the requirement for the Louisiana Department of Health to register cosmetic products. *[gov. sig.]*

02-27-2026	Prefiled and referred to committee.
03-24-2026	Amended, then reported favorably.
03-25-2026	Adopted committee amendments; bill engrossed; Passed to 3 rd reading and floor vote.
03-30-2026	Passed the House (88-7); sent to the Senate; Received in the Senate; committee referral pending.
03-31-2026	Referred to the Senate Committee on Health & Welfare.
05-13-2026	Reported favorably.
05-14-2026	Referred to Legislative Bureau.
05-18-2026	Reported without Bureau amendments; Passed to 3 rd reading and final passage.
05-21-2026	Passed the Senate (27-6); returned to the House.
05-25-2026	Received from the Senate without amendments; Enrolled; signed by House Speaker and Senate President.
05-26-2026	Sent to Governor for executive approval.
05-29-2026	Signed by Governor as Act No. 573 ; effective 05-29-2026.

This bill seeks to amend the food, drug, and cosmetic law by enacting a new section recognizing cottage cosmetic facilities [entities which manufacture, pack, or hold cosmetic products for distribution, is located in a private residence, does not sell to end users], exempting them from licensing requirements and payment of any fees to the state health department. Further, the bill removes the requirement for the state health department to register any cosmetic products. [House Committee Amendment No. 2276](#) two technical changes and two substantive changes removed the original exceptions to the bill's exemptions and replaced them with exceptions relating to the manufacture of cosmetics that are injected, intended for internal use, applied to any mucous membranes, or are intended to alter appearance for longer than 24 hours. The second substantive amendment clarified that facilities which sell cosmetic products directly to consumers shall be regulated in accordance with the Federal Food, Drug, and Cosmetic Act including the Modernization of Cosmetic Regulation Act of 2022 and are not subject to the facility

permitting and inspection requirements of the state food, drug, and cosmetic law. In addition, nothing in the bill shall be construed to exempt any facility from applicable state and local sales and use tax laws, including registration requirements.

HB 948 B. Amedee [R-51], Houma Health & Welfare
Provides with respect to the rights of parents regarding the medical treatment of their minor children. [08-01-2026]

02-27-2026 Prefiled and referred to committee.
04-23-2026 Presented, then voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the public health law, and more specifically the part regarding minor's consent to medical treatment. The bill adds a new subpart prohibiting any government entity, child welfare agency, law enforcement officer, court, or healthcare facility to take any adverse action against a parent solely because the parent declines chemotherapy or any other cancer treatment for their minor child, or seeks or obtains a second opinion regarding a diagnosis or proposed treatment for a minor in a non-emergency situation, or proceeds against medical advice or declines medical interventions while pursuing other treatment options for their minor child. An aggrieved parent may bring a civil action for declaratory relief, injunctive relief, actual damages, and reasonable attorney fees and costs. Sovereign or governmental immunity is waived to the extent of liability.

HB 962 D. Miller [D-40], Opelousas Health & Welfare
Provides relative to reconstitution of medications for intravenous therapy. [08-01-2026]

03-10-2026 Filed.
03-11-2026 Referred to committee.
04-01-2026 On agenda but not considered.
04-08-2026 Amended, then reported favorably.
04-09-2026 Committee amendments adopted; bill engrossed;
 Passed to 3rd reading and floor vote.
04-14-2026 Passed House (101-0); sent to the Senate;
 Received in the Senate; committee referral pending.
04-15-2026 Referred to the Senate Committee on Health & Welfare.
04-22-2026 Reported favorably.
04-27-2026 Referred to the Legislative Bureau.
04-28-2026 Reported without Bureau amendments;
 Passed to 3rd reading and final passage.
05-11-2026 Amended, then passed the Senate (35-0);
 returned to the House.
05-12-2026 Received in the House with Senate amendments.
05-13-2026 House concurred with Senate amendments (95-0).
05-18-2026 Enrolled; signed by House Speaker and Senate President.
05-19-2026 Sent to Governor for executive approval.
05-22-2026 Signed by Governor as **Act No. 329**; effective 08-01-2026.

This bill seeks to amend the nursing practice law to specifically indicate that reconstitution of medications does not constitute compounding. House Committee Amendment No. 3338 moved the bill language to a more appropriate section of nursing

law and authorizes a registered nurse to prepare medication by mixing or reconstituting a medication for immediate administration pursuant to a prescription order. [Senate Floor Amendment No. 2845](#) made a technical change.

[HB 984](#) T. Kerner [R-84], Lafitte Civil Law & Procedure
Provides relative to medical malpractice and the limitation of recovery.
[08-01-2026]

03-18-2026 Filed; committee referral pending.
03-23-2026 Referred to committee.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the medical malpractice law which currently provides that the total amount of recovery for the injury to or death of a patient of qualified providers shall not exceed \$500,000 plus interests and costs, exclusive of the costs of future medical care. The bill increases the \$500,000 to \$750,000.

[HB 1047](#) S. Mena [D-23], New Orleans Labor & Industrial Relations
Provides relative to requests for prior authorizations for prescription medications.
[08-01-2026]

03-30-2026 Filed; committee referral pending.
03-31-2026 Referred to committee.
04-28-2026 Presented, then voluntarily deferred for one week.
05-07-2026 Voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the worker compensation law, specifically an existing section relative to the submittal of information by medical providers in response to prior authorization notices. The current law requires a response to the medical provider within certain time frames as well as a response to any subsequent appeal by a medical provider of a denial by a certain time frame. This bill adds a provision that this section of law shall not apply to requests for prescription medications.

[HB 1049](#) C. Owen [R-30], Rosepine House & Governmental Affairs
Provides relative to public meetings. [08-01-2026]

03-30-2026 Filed; committee referral pending.
03-31-2026 Referred to committee.
04-14-2026 Reported favorably.
04-15-2026 Bill engrossed; passed to 3rd reading and floor vote.
04-21-2026 Passed the House (98-0); sent to the Senate;
Received in the Senate; committee referral pending.
04-22-2026 Referred to the Committee on Senate & Governmental Affairs.
05-27-2026 Amended, then reported favorably;
Referred to Legislative Bureau;
Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-28-2026 Passed the Senate (33-0); returned to the House;
Received from the Senate with amendments.
05-29-2026 House concurred with Senate amendments (97-0).

05-31-2026 Enrolled; signed by House Speaker and Senate President.
06-01-2026 Sent to Governor for executive approval.
06-08-2026 Signed by Governor as **Act No. 867**; effective 08-01-2026.

This bill seeks to amend the Open Meetings Law by requiring a public body ensure legal counsel is present, or in the alternative, the presiding member has a general understanding of the open meeting law. The existing provision relative to the meeting notice is amended to ensure the notice may be read by the public at the meeting location. The minutes shall include, for each motion made, the name of the member who made the motion as well as the name of the member who seconded the motion. Finally, a draft copy of the minutes shall be available to the members of the public body no later than one month after the meeting. Senate Committee Amendment No. 4457 removed the subsection requiring the presence of an attorney as well as a presiding officer with a general understanding of the open meeting law; amends an existing section of the open meeting law applicable only to school boards to allow them to create reasonable rules and restrictions on public comments at their meetings; removed the requirement for written minutes to specify the name of the member who made and seconded each motion; and changed the requirement for availability of draft minutes, from no later than one month after the meeting to no later than 5 days before the meeting where the minutes will be considered for approval.

HB 1093 J. Carlson [R-43], Lafayette Health & Welfare
Creates the Louisiana Naturopathic Medicine Examining Board. [08-01-2026]
03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-23-2026 Removed from agenda prior to meeting.
04-29-2026 Presented, then voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to create a new healthcare provider licensure act, specifically for naturopathic medicine. The bill creates the 5-member board, provides for its powers and duties, provides for its licensure and regulatory authority, and establishes the independent practice of naturopathic medicine in this state. Among other privileges, the bill provides prescriptive authority for a long list of natural and other products as well as controlled substances listed in Schedules III through V. Naturopathic physicians may prescribe, administer, compound, and dispense treatments for their patients; however, the bill requires oversight by the state pharmacy board. Of note, the details of that oversight are not included within the bill.

HB 1114 W. Carter [D-34], Lake Charles Health & Welfare
Provides relative to licensing by the Louisiana State Board of Nursing. [08-01-2026]
03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-23-2026 On agenda but not considered.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the nurse practice act, more specifically the existing provision relative to the reinstatement of a previously suspended license related to a substance use disorder. The bill authorizes the licensee applicant to submit an independent

medical evaluation from a physician, psychiatrist, or advance practice registered nurse qualified in addiction medicine, requires the nursing board to recognize medication-assisted treatment as an evidence-based treatment for opioid use disorder, and prohibits the nursing board from denying a reinstatement application solely on the basis the licensee applicant is receiving medication-assisted treatment prescribed by a licensed healthcare provider.

[HB 1121](#) L. Ventrella [R-65], Greenwell Springs Health & Welfare
Authorizes certain healthcare entities to refuse to provide healthcare services under certain circumstances. [08-01-2026]

03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-23-2026 On agenda but not considered.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to establish a new section of law authorizing healthcare institutions, healthcare payors, and licensed healthcare professionals to refuse to provide or participate in healthcare services when such services violate the institution's, payor's, or professional's moral conscience. The bill prohibits the imposition of any adverse actions when such refusals occur.

[HB 1143](#) D. Miller [D-40], Opelousas Health & Welfare
Provides relative to physician assistants. [08-01-2026]

03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-14-2026 Amended, then voluntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the medical practice act and all other statutory references to physician assistants, to change that term to physician associates. [House Committee Amendment No. 3559](#) inserted two sets of technical amendments.

[HB 1155](#) R. Carter [D-72], Greensburg Health & Welfare
Provides for the use of nitrous oxide by physicians during medical procedures. [08-01-2026]

03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-23-2026 On agenda but not considered.
05-06-2026 Reported favorably.
05-07-2026 Bill engrossed; passed to 3rd reading and floor vote.
05-11-2026 Passed the House (99-0); sent to the Senate;
Received in the Senate; committee referral pending.
05-12-2026 Referred to the Senate Committee on Health & Welfare.
05-20-2026 Reported favorably.
05-21-2026 Referred to Legislative Bureau.
05-25-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-26-2026 Called for debate; returned to calendar, subject to call.

05-27-2026 Passed the Senate (36-0); returned to the House.
 05-28-2026 Received from the Senate without amendment;
 Enrolled; signed by House Speaker and Senate President.
 05-29-2026 Sent to Governor for executive approval.
 06-01-2026 Signed by Governor as **Act No. 707**; effective 08-01-2026.

This bill seeks to amend the medical practice act to authorize the use of nitrous oxide by physicians during minor office procedures according to rules and guidelines promulgated by the medical board.

HB 1160 M. Echols [R-14], Monroe Health & Welfare
 Provides relative to rural physician licenses. [08-1-2026]

03-31-2026 Filed; committee referral pending.
 04-01-2026 Referred to committee.
 04-14-2026 Amended, then reported favorably.
 04-15-2026 Committee amendments adopted; bill engrossed;
 Passed to 3rd reading and floor vote.
 04-22-2026 Passed the House (94-0); sent to the Senate;
 Received in the Senate; committee referral pending.
 04-27-2026 Referred to the Senate Committee on Health & Welfare.
 05-20-2026 Reported favorably.
 05-21-2026 Referred to Legislative Bureau.
 05-25-2026 Reported without Bureau amendments;
 Passed to 3rd reading and final passage.
 05-26-2026 Passed the Senate (38-0); returned to the House;
 Received in the House without amendment.
 05-27-2026 Enrolled; signed by House Speaker and Senate President.
 05-28-2026 Sent to Governor for executive approval.
 06-09-2026 Signed by Governor as **Act No. 879**; effective 08-01-2026.

This bill seeks to amend the medical practice act to provide for the licensure of certain internationally educated physicians. The bill requires the medical board to issue a restricted rural physician license to graduates of foreign medical schools who have completed medical education substantially equivalent to an allopathic or osteopathic medical education and met other requirements. The holder of such license shall practice only in rural or other underserved areas in the state or in a facility or clinic approved by the state health department or the board. The holder shall practice at least two years under medical supervision. Following at least five years of continuous practice with the restricted license, the physician may obtain a full unrestricted license provided the applicant meets criteria specified in the bill. House Committee Amendment No. 3757 inserted six sets of technical amendments.

HB 1216 P. Egan [R-74], Covington Health & Welfare
 Provides relative to the guidelines for clinical laboratory personnel. [08-01-2026]

03-31-2026 Filed; committee referral pending.
 04-01-2026 Referred to committee.
 04-14-2026 Amended, then reported favorably.
 04-15-2026 Committee amendments adopted; bill engrossed;
 Passed to 3rd reading and floor vote.

04-21-2026 Amended, then passed House (97-0); bill re-engrossed;
Sent to the Senate.
04-22-2026 Received in the Senate; committee referral pending.
04-27-2026 Referred to the Senate Committee on Health & Welfare.
05-20-2026 Involuntarily deferred.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the medical practice act, more specifically the part relative to clinical laboratory personnel. The bill is a substantial revision of that part of law. The bill appears to preserve the exemption from the licensure requirement for persons performing CLIA-waived laboratory procedures at the point of care, e.g., in pharmacies. [House Committee Amendment No. 3786](#) inserted nine sets of amendments, all but one of which are technical. The substantive amendment gave any entity subject to accreditation by the bill until August 1, 2028 to achieve that accreditation or face adverse consequences as provided in the bill.

[HB 1217](#) M. Echols [R-14], Monroe Health & Welfare

Provides with respect to pharmacy benefit managers. (*gov. sig.*)

03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-15-2026 On agenda but not considered.
04-23-2026 Amended, then reported favorably.
04-27-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-29-2026 Amended, then passed the House (93-0); sent to the Senate.
05-04-2026 Received in the Senate; committee referral pending.
05-05-2026 Referred to the Senate Committee on Health & Welfare.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend two different titles of law – the insurance law as well as the pharmacy benefit manager (PBM) licensing law. With respect to the latter, the bill inserts a new term in the list of definitions, that of ‘fiduciary.’ The bill also amends the duties of PBMs to require them to act as fiduciaries toward health plans or plan sponsors while delivering their PBM services. Finally, the bill provides that any compensation flowing through an affiliated entity shall be considered PBM compensation for regulatory purposes. [House Committee Amendment No. 4400](#) inserted 43 sets of amendments, almost all of which are technical. The substantive amendment in the PBM licensing portion of the bill was the removal of the fiduciary requirement. [House Floor Amendment No. 4729](#) inserted four sets of technical amendments.

[HB 1220](#) J. LaCombe [R-18], Livonia Health & Welfare

Provides relative to the Louisiana State Board of Medical Examiners. [08-01-2026]

03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-23-2026 Amended, then reported favorably.
04-27-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-29-2026 Passed the House (95-0); sent to the Senate;

Received in the Senate; committee referral pending.
05-04-2026 Referred to the Senate Committee on Health & Welfare.
05-20-2026 Reported favorably.
05-21-2026 Referred to Legislative Bureau.
05-25-2026 Reported without Bureau amendments;
Passed to 3rd reading and final passage.
05-26-2026 Called for debate; returned to the calendar, subject to call.
05-28-2026 Called for debate; amended;
Returned to the calendar, subject to call; amended again;
Passed the Senate (33-0); returned to the House.
05-29-2026 Received in the House with amendments.
05-31-2026 House rejected Senate amendments (94-0);
Referred to Conference Committee;
Notice of Senate conferees: McMath, Pressly, Miller.
06-01-2026 Notice of House conferees: LaCombe, Miller, Riser.
Conference Committee Report received.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the medical practice act, more specifically the provisions relative to board membership, the source of their nominations, and the amount of time the appointee shall have resided within the state. A new provision is that no appointee may serve on the board if he also serves on the governing body of the nominating organization. The board's domicile is changed to Baton Rouge by this bill. Finally, the board is required to appoint at least two executive officers for its staff – an executive director who is not required to be physician and a director of investigations who shall have practiced as a physician in the state for at least five years. [House Committee Amendment No. 4371](#) changed one of the sources of nominations for board members and also removed the change of domicile which would have forced the board to move from New Orleans to Baton Rouge. [Senate Floor Amendment No. 4401](#) added a requirement for the board to broadcast live their meetings and place copies of the meeting videos on its website no later than 48 hours after the meeting, and further, for the board to place all meeting materials on its website at least two business days before the meeting. In addition, that amendment directs the board to promulgate any rules necessary to extend the expiration date for all licenses issued by the board to at least two years after the date of issue, and to complete that process no later than July 1, 2027. [Senate Floor Amendment No. 4580](#) added a requirement for the board to maintain contact information for all of its licensees, including business email addresses and telephone numbers. [Conference Committee Report No. 6334](#) adopted Senate Floor Amendment No. 4401 relative to broadcasting board meetings but rejected Senate Floor Amendment No. 4582 relative to maintaining email addresses and telephone numbers for all their licensees, and in addition, replaced the La. Medical Association as a source of nominations for two of the board members with two members serving at the pleasure of the governor.

[HB 1227](#) J. DeWitt [R-25], Tioga Health & Welfare
Provides with respect to the Louisiana State Board of Medical Examiners. [08-1-2026]
03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-23-2026 Presented, then voluntarily deferred for up to two weeks.

05-06-2026 Presented, then voluntarily deferred for one additional week.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the medical practice act, to establish a new subsection of law relative to investigations and adjudications. The bill requires complaints in which the allegations require evaluation of clinical decision-making, diagnosis, treatment, prescribing, supervision of clinical care, documentation of care, or standard of care shall receive peer physician review before escalation to formal disciplinary proceedings. The physician review panel shall consist of three physicians with no connection to the board. The panel shall review all matters pertinent to the allegations and report their findings and recommendations to the board, who may or may not accept their recommendations.

[#HB: 39]

Resolutions

[HR 174](#) C. Owens [R-30], Rosepine Health & Welfare
Requests the state surgeon general and the Louisiana Department of Health to assess the feasibility of advancing fenbendazole for potential human use in cancer treatment and to provide guidance on engaging federal authorities for expediting evaluation while protecting human health.

04-20-2026 Filed; committee referral pending.
04-21-2026 Referred to committee.
05-12-2026 Reported favorably.
05-13-2026 Engrossed; passed to 3rd reading and floor vote.
05-18-2026 Amended, then passed House (86-0);
05-19-2026 **Enrolled**; signed by House Speaker.
05-21-2026 Sent to the Secretary of State.

This resolution requests the state surgeon general to perform the requested assessment and deliver the report no later than February 1, 2027. [House Floor Amendment No. 5755](#) expanded the scope to include 'similar treatments.'

[#HR: 1]

Concurrent Resolutions

[HCR 71](#) T. Chassion [D-44], Lafayette Health & Welfare
Requests the Louisiana Department of Health to review the implementation of existing law and guidance regarding pregnancy-related emergency medications in hospital and acute care settings.

04-20-2026 Filed; committee referral pending.
04-21-2026 Referred to committee.
05-06-2026 Amended, then reported favorably.
05-07-2026 Committee amendments adopted; resolution engrossed;
Passed to 3rd reading and floor vote.
05-11-2026 Called by title; returned to the calendar, subject to call.
06-01-2026 Resolution died when legislature adjourned *sine die*.

This concurrent resolution requests the state health department, medical board, pharmacy board, and hospital association to study the implementation of Act 246 of the 2024 Legislature which placed mifepristone and misoprostol in Schedule IV of the state list of controlled substances, any impact on access to care as a result of the scheduling action, and present a report on its findings and any recommendations to the legislature by February 1, 2027. [House Committee Amendment No. 5147](#) added two additional requests for the study.

[HCR 120](#) R. Lyons [D-87, Marrero] Committee review deferred
Creates the PACE Task Force to prioritize access, care, and education on GLP-1 medications.

05-27-2026 Filed; committee referral pending.
05-28-2026 Rule suspended; passed to 3rd reading and floor vote.
05-31-2026 Passed the House (81-11); sent to the Senate.
06-01-2026 Received in the Senate; rule suspended and committee referral waived; rule suspended and passed to 3rd reading and floor vote; passed the Senate (33-0); returned to the House;
Enrolled; signed by House Speaker and Senate President.
06-05-2026 Sent to the Secretary of State.

This concurrent resolution creates a task force to study the history, accessibility, and insurance costs of GLP-1 medications and to propose specific recommendations to the legislature. The task force is composed of 5 members, one of which shall be the president of the pharmacy board or his designee, and the task force is directed to study 8 specifically listed topics. They shall convene their first meeting no later than September 1, 2026 and shall submit their report to the legislature no later than February 12, 2027.

[#HCR: 2]

Senate

Bills

[SB 30](#) P. McMath [R-11], Covington Health & Welfare
Provides relative to telehealth. *[gov. sig.]*

02-03-2026 Prefiled and referred to committee.
03-11-2026 Amended, then reported favorably.
03-16-2026 Committee amendment adopted; bill engrossed;
Passed to 3rd reading and floor vote.
03-17-2026 Passed Senate (37-0); sent to the House.
03-18-2026 Received in the House; committee referral pending.
03-23-2026 Referred to House Committee on Health & Welfare.
04-29-2026 Amended, then reported favorably;
Referred to the Legislative Bureau.
05-05-2026 Reported without Bureau amendment.
05-06-2026 Passed to 3rd reading and final passage.
05-07-2026 Amended, then passed the House (97-0);

Returned to the Senate for concurrence.
 05-11-2026 Received in the Senate with House amendments.
 05-18-2026 Senate concurred with House amendments.
 05-19-2026 Enrolled; signed by Senate President and House Speaker.
 05-20-2026 Sent to Governor for executive approval.
 05-22-2026 Signed by Governor as **Act No. 345**; effective 05-22-2026.

This bill seeks to amend the state telehealth access law, to prohibit any state agency or licensing board from adopting or enforcing any rule or policy that prohibits or restricts a licensed healthcare provider from using telehealth to evaluate, diagnose, or treat obesity or a related metabolic condition, including the prescription of FDA-approved or compounded noncontrolled medication, provided the healthcare provider acts within the scope of their license and in accordance with the applicable standard of care. The bill was prompted by the medical board's long-standing (and pre-dating the evolution of telehealth) rule for obesity treatment using controlled substances. [Senate Committee Amendment No. 777](#) clarified the bill to indicate that telehealth shall utilize synchronous interactions with the patient and not asynchronous interactions. [House Committee Amendment No. 4629](#) inserted three sets of technical amendments as well as another amendment that changed "to treat obesity or a related medical condition" to read "to treat obesity or provide weight management services", thus limiting the potential number of metabolic conditions to obesity and weight management. [House Floor Amendment No. 5217](#) removed the provision which indicated no state agency could prohibit the use of telehealth relative to the use of peptides, and instead, specified that the medical board and nursing board could not prohibit that activity. In addition, the amendment removed the specific language related to the use of FDA approved or compounded medications.

SB 36 M. Fesi [R-20], Houma Health & Welfare
 Provides relative to vaccines. [08-01-2026]
 02-06-2026 Prefiled and referred to committee.
 03-18-2026 Amended, then deferred in lieu of a potential SCR. {see SCR 37}
 06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend two sections of public health law – the state food, drug and cosmetic law as well as the uniform consent law. The bill seeks to add a provision to the state food, drug and cosmetic law to prohibit the use of food as a delivery mechanism for an mRNA vaccine. The bill also seeks to add a new section to the uniform consent law relative to informed consent to vaccinations. The new section provides for the process for a healthcare provider to obtain informed consent from a patient prior to administering a vaccine. The new section also identifies certain circumstances in which a person shall not be considered capable of providing informed consent. Finally, the new section indicates the informed consent for vaccinations shall be in addition to any requirements of the existing uniform consent law. [Senate Committee Amendment No. 924](#) removed the provision relative to the use of food as a delivery mechanism for an mRNA vaccine. The amendment also inserted a specific deadline of October 1, 2026 for the surgeon general to develop a state vaccine consent form, and immunizers shall begin to provide that form no later than November 1, 2026. The committee expressed concerns about the potential conflict of the proposed consent law with the existing medical consent law and requested the filing of a concurrent

resolution asking the state surgeon general to study the matter and report her findings and recommendations.

SB 43	P. McMath [R-11], Covington	Health & Welfare
Provides relative to psychedelic-assisted therapy. [08-01-2026]		
02-12-2026	Prefiled and referred to committee.	
03-25-2026	Amended, then reported favorably.	
03-30-2026	Committee amendments adopted; bill engrossed; Dual referral to Committee on Finance (due to fiscal note).	
04-07-2026	Recalled from Committee on Finance; Passed to 3 rd reading and floor vote.	
04-08-2026	Called for debate; returned to the calendar, subject to call.	
04-15-2026	Called; amended, then passed the Senate (37-0); bill re-engrossed; sent to the House.	
04-20-2026	Received in the House; committee referral pending.	
04-21-2026	Referred to the House Committee on Health & Welfare.	
04-28-2026	Amended, then reported favorably; Referred to the Legislative Bureau.	
04-29-2026	Reported without Bureau amendments.	
05-05-2026	Passed to 3 rd reading and final passage.	
05-07-2026	Amended, then passed the House (97-0); bill re-engrossed; Returned to the Senate for concurrence.	
05-11-2026	Received in the Senate with House amendments.	
05-18-2026	Senate rejected House amendments (34-1); Referred to Conference Committee.	
05-19-2026	Notice of House conferees: Riser, Egan, Miller.	
05-21-2026	Notice of Senate conferees: McMath, Luneau, Owen.	
05-25-2026	Conference Committee Report received; lies over.	
05-29-2026	Senate adopted Conference Committee Report (35-0).	
05-31-2026	House adopted Conference Committee Report (97-0).	
06-01-2026	Enrolled; signed by Senate President and House Speaker; Sent to Governor for executive approval.	
06-21-2026	Became Act No. 956 without Governor's signature; Effective 08-01-2026.	

This bill seeks to create a new part of mental health law, to authorize the state health department to establish a psychedelic-assisted therapy program. The bill provides for clinical studies, patient eligibility, funding, and reporting. Among other definitions, psychedelic medication is defined as ibogaine, ibogaine-related therapeutics, ibogaine analog-s, psilocybin, psilocybin-related therapeutics, and psilocybin analogs. The bill authorizes the study of such medications for the treatment of opioid use disorders, co-occurring substance use disorders, and treatment-resistant neurological or mental health conditions. [Senate Committee Amendment No. 1132](#) inserted 19 sets of amendments. In addition to the 16 technical amendments, the three substantive amendments (1) added two definitions for “drug developer” and “ibogaine”; (2) changed the requirement for the state health department to approve participation by academic health centers to a requirement for the health department to maintain a record of all academic health centers participating in the program; and (3) inserted a new subsection of law authorizing academic health centers to enter into agreements with drug

developers to establish a consortium for the purpose of conducting clinical trials with ibogaine and securing the federal FDA's approval of ibogaine as a medication for the treatment of opioid use disorder, co-occurring substance use disorder, and other health conditions. The amendment also addresses revenue attributable to intellectual property rights for the state. [Senate Floor Amendment No. 2044](#) inserted 17 sets of amendments, all of which are technical. [House Committee Amendment No. 4647](#) inserted 18 sets of technical amendments. [House Floor Amendment No. 5236](#) inserted 19 amendments, some of which were technical. One of the amendments inserted MDMA to the list of drugs which could be studied. [Conference Committee Report No. 4043](#) adopted the House amendments and inserted a technical correction.

SB 45 W. Wheat [R-37], Ponchatoula Health & Welfare
Provides relative to hospice care. *[gov. sig.]*

- 02-12-2026 Prefiled and referred to committee.
- 03-11-2016 Amended, then reported favorably.
- 03-16-2026 Committee amendment adopted; bill engrossed;
Passed to 3rd reading and floor vote.
- 03-17-2026 Passed Senate (37-0); sent to the House.
- 03-18-2026 Received in the House; committee referral pending.
- 03-23-2026 Referred to House Committee on Health & Welfare.
- 05-06-2026 Amended, then reported favorably;
Referred to Legislative Bureau.
- 05-07-2026 Reported without Bureau amendment.
- 05-11-2026 Committee amendments adopted;
Passed to 3rd reading and final passage.
- 05-13-2026 Passed the House (94-0); returned to the Senate;
Received in the Senate with House amendments.
- 05-19-2026 Senate concurred with House amendments (35-0).
- 05-20-2026 Enrolled; signed by Senate President and House Speaker.
- 05-21-2026 Sent to Governor for executive approval.
- 05-29-2026 Signed as **Act No. 453**; effective 05-29-2026.

This bill seeks to amend the hospice licensing law, to authorize exemptions to licensure requirements for certain non-profit organizations that provide gratuitous end-of-life care and do not receive any payments from Medicare, Medicaid, or other public or private health insurance. [Senate Committee Amendment No. 779](#) clarified the bill applies to single homes hosting a maximum of three patients at one time. [House Committee Amendment No. 5096](#) inserted a technical amendment.

SB 57 P. McMath [R-11], Covington Health & Welfare
Provides relative to nutrition. *[01-01-2028]*

- 02-18-2026 Prefiled and referred to committee.
- 05-06-2026 Amended, then reported favorably.
- 05-07-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
- 05-11-2026 Passed the Senate (36-0); sent to the House;
Received in the House; committee referral pending.
- 05-12-2026 Referred to the House Committee on Health & Welfare.
- 05-19-2026 Reported favorably; referred to Legislative Bureau.

05-20-2026 Reported without Bureau amendments.
 05-25-2026 Passed to 3rd reading and final passage.
 05-26-2026 Amended, then passed the House (98-0);
 Returned to the Senate;
 Received in the Senate with House amendments.
 05-27-2026 Senate concurred with House amendments (37-0).
 05-28-2026 Enrolled; signed by Senate President and House Speaker.
 05-29-2026 Sent to Governor for executive approval.
 06-01-2026 Signed by Governor as **Act No. 735**; effective 01-01-2028.

This bill seeks to amend the state food safety law, in particular the new section of that law established by Act 463 of the 2025 Legislature which is scheduled to become effective on January 1, 2028. That 2025 law requires the disclosure of 44 specifically listed harmful ingredients when present in any food offered for sale in the state. That 2025 law currently provides for certain exemptions including any drug regulated by the federal FDA or dietary supplement regulated under the Dietary Supplement Health & Education Act. This bill adds an additional exemption for foods for special dietary use as defined in 21 CFR 105. [Senate Committee Amendment No. 3301](#) removed the entire contents of the original bill and preserved the original January 1, 2028 effective date of the original legislation. [House Floor Amendment No. 6109](#) amended the harmful disclosure requirements in the state food law adopted last year to clarify those requirements are applicable only to certain foods and beverages where the federal FDA requires such ingredients to be listed on labels; and further, this amendment removes one specific entry (a sweetener, acesulfame potassium) from the list of prohibited ingredients which may not be served to students in public schools as noted in the state education law.

SB 195 B. Myers [R-23], Lafayette Health & Welfare

Provides relative to the administration of medications. [08-01-2026]

02-26-2026 Prefiled and referred to committee.
 03-18-2026 Reported favorably.
 03-23-2026 Bill engrossed; passed to 3rd reading and floor vote.
 03-25-2026 Amended, then passed Senate (35-0); bill reengrossed;
 Sent to the House.
 03-30-2026 Received in the House; committee referral pending.
 03-31-2026 Referred to the House Committee on Health & Welfare.
 04-29-2026 Reported favorably; referred to the Legislative Bureau.
 05-05-2026 Reported without Bureau amendment.
 05-06-2026 Passed to 3rd reading and final passage.
 05-11-2026 Passed the House (97-0); returned to the Senate;
 Received in the Senate without House amendments.
 05-12-2026 Enrolled; signed by Senate President and House Speaker.
 05-13-2026 Sent to Governor for executive approval.
 05-15-2026 Signed by Governor as **Act No. 252**; effective 08-01-2026.

This bill seeks to amend the public health law, more specifically the chapter relative to emergency medical service personnel. The bill authorizes licensed emergency medical technicians, licensed advanced emergency medical technicians, and licensed paramedics to administer patient-carried, time-critical prescription medications (limited

to intranasal, intravenous, and intramuscular dosage forms) to patients with rare diseases, chronic illnesses, and special medical needs at the patient's request in accordance with protocols to be developed by the state emergency medical services commission. [Senate Floor Amendment No. 1228](#) changed the responsible entity for development of the required protocols from the state EMS commission to the EMS practitioner's EMS medical director.

[SB 250](#) P. McMath [R-11], Covington Finance
Provides relative to comprehensive weight management services. [08-01-2026]
02-26-2026 Prefiled and referred to committee.
05-11-2026 Amended, then reported favorably.
05-12-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
05-13-2026 Amended, then passed the Senate (35-0);
Bill re-engrossed; sent to the House.
05-18-2026 Received in the House; committee referral pending.
05-19-2026 Referred to House Committee on Appropriations.
05-26-2026 Reported favorably; referred to the Legislative Bureau.
05-27-2026 Reported with Bureau amendments.
05-28-2026 Bureau amendments adopted;
Passed to 3rd reading and final passage.
05-29-2026 Passed the House (86-4); returned to the Senate;
Received in the Senate with amendments;
Pending Senate concurrence with House amendments.
05-31-2026 Senate concurred with House amendments (36-0).
06-01-2026 Enrolled; signed by Senate President and House Speaker;
Sent to Governor for executive approval.
06-02-2026 Signed by Governor as **[Act No. 749](#)**; effective 08-01-2026.

This bill seeks to amend the law governing the State Employees Group Benefit Program, to authorize that office to contract with qualified healthcare providers, pharmacy partners, and program administrators to provide comprehensive weight management services, including FDA-approved medications and clinically appropriate compounded therapies. [Senate Committee Amendment No. 2296](#) requires any beneficiary within OGB plans to pay the full premium for any comprehensive weight management service, and further, to require any such beneficiary to pay the full cost of any weight loss product obtained directly from a pharmaceutical manufacturer. [Senate Floor Amendment No. 3763](#) made a technical correction to a citation number. [House Bureau Amendment No. 4430](#) inserted technical corrections.

[SB 253](#) P. McMath [R-11], Covington Health & Welfare
Provides relative to peptides. [08-01-2026]
02-26-2026 Prefiled and referred to committee.
03-11-2026 Amended, then reported favorably.
03-16-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
03-23-2026 Amended, then passed Senate (35-0); reengrossed;
sent to the House.
03-24-2026 Received by the House; committee referral pending.

03-25-2026 Referred to House Committee on Health & Welfare.
 04-28-2026 Amended, then reported favorably;
 Reported to the Legislative Bureau.
 04-29-2026 Reported without Bureau amendments.
 05-05-2026 Passed to 3rd reading and final passage.
 05-07-2026 Passed the House (98-0); returned to the Senate for concurrence.
 05-11-2026 Received in the Senate with House amendments.
 05-18-2026 Senate concurred with House amendments.
 05-19-2026 Enrolled; signed by Senate President and House Speaker.
 05-20-2026 Sent to Governor for executive approval.
 05-22-2026 Signed by Governor as **Act No. 374**; effective 08-01-2026.

This bill seeks to amend the introductory chapter of Title 37 which contains all healthcare provider practice acts. The bill indicates that no healthcare licensing board may prohibit a healthcare provider with prescriptive authority from providing patients with peptides shipped from an FDA-registered 503-B facility or a 503-A compounding pharmacy that buys its active pharmaceutical ingredients from an FDA-registered manufacturer. The prescribing provider shall ensure any peptides prescribed pursuant to this law are not present on the FDA's prohibited compounding list. [Senate Committee Amendment No. 780](#) added a new subsection to the bill to prohibit any licensing board from prohibiting a state-licensed pharmacy from compounding and dispensing peptides, provided the peptide is not included in the FDA's compounding prohibited list or the FDA Category List 2 list of bulk substances. Once removed from such lists, the pharmacy may compound such items provided the active pharmaceutical ingredient is acquired from an FDA-registered manufacturer and complies with all applicable federal and state compounding laws and regulations. [Senate Floor Amendment No. 1121](#) removed the references to the FDA lists and clarified that 503B outsourcing facilities shall comply with 21 USC 353b and that 503A compounding pharmacies shall comply with 21 USC 353a and applicable USP chapters. The amendment also provided that the compounding of peptides in 503A facilities shall be accomplished by Louisiana-licensed pharmacists in a state permitted pharmacy. [House Committee Amendment No. 4684](#) inserted four technical amendments, and in addition, inserted another amendment to remove the liability of the prescriber to ensure the pharmacy's compliance with federal laws and national standards.

SB 270 K. Jackson-Andrews [D-34], Monroe Health & Welfare
 Provides for access to medical marijuana for terminally ill patients in a healthcare facility. **[08-01-2026]**

02-27-2026 Prefiled and referred to committee.
 03-25-2026 Voluntarily deferred for one week.
 04-01-2026 Amended, then reported favorably.
 04-07-2026 Committee amendments adopted; bill engrossed;
 Passed to 3rd reading and floor vote.
 04-08-2026 Passed the Senate (33-2); sent to the House.
 04-09-2026 Received in the House; committee referral pending.
 04-13-2026 Referred to the House Committee on Health & Welfare.
 05-12-2026 Reported favorably; referred to the Legislative Bureau.
 05-13-2026 Reported without Bureau amendments.
 05-18-2026 Passed to 3rd reading and final passage.

05-19-2026 Passed House (54-44); returned to the Senate;
Received in the House without Senate amendments.
05-20-2026 Enrolled; signed by Senate President.
05-21-2026 Sent to Governor for executive approval.
06-01-2026 Became **Act No. 602** without Governor's signature;
effective 08-01-2026.

This bill seeks to amend the therapeutic marijuana law to enact a new section relative to the use of medical marijuana for terminally ill patients in a healthcare facility licensed under the authority of R.S. 40:2006(A) {Note: 19 different types of facilities are listed in this statute, including hospital, ambulatory surgical center, nursing home, hospice, and home health agency}. The facility shall permit a terminally ill patient in possession of medical marijuana to consume their own product while a patient in the facility, except when the patient is in the emergency room receiving emergency medical services. There are provisions for exemption when federal agencies notify facilities or initiate actions against facilities related to the use of medical marijuana. [Senate Committee Amendment No. 1620](#) made several substantive amendments: the definition of healthcare facilities was changed to exclude freestanding or distinct units for behavioral health, emergency, or outpatient units; definition of 'patient' was added to mean a person who has a terminal and irreversible condition and maintains a current recommendation to use medical marijuana; requiring the patient or their caregiver to be responsible for acquiring, storing, retrieving, administering, and removing medical marijuana; prohibiting healthcare professionals including physicians, nurses, pharmacists and others from administering, storing, retrieving, or assisting the patient with medical marijuana; requiring hospitals to develop, disseminate, and train their staff on facility-developed guidelines for patient use of medical marijuana within the facility. Finally, the exemption provision when federal agencies notify a facility of an adverse action, then all hospitals may suspend compliance with this new section of law.

SB 304 R. Edmonds [R-6], Baton Rouge Education
Provides for accreditation of public colleges and universities. *[gov. sig.]*

02-27-2026 Prefiled and referred to committee.
04-08-2026 Amended, then reported favorably.
04-13-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-15-2026 Passed the House (27-9); sent to the House.
04-16-2026 Received in the House; committee referral pending.
04-20-2026 Referred to the House Committee on Education.
05-06-2026 Reported favorably; referred to Legislative Bureau.
05-07-2026 Reported without Bureau amendment.
05-11-2026 Passed to 3rd reading and final passage.
05-13-2026 Amended, then passed the House (77-14); returned to the Senate;
Received in the Senate with House amendments.
05-19-2026 Senate concurred with House amendments (31-2).
05-20-2026 Enrolled; signed by Senate President and House Speaker.
05-21-2026 Sent to Governor for executive approval.
05-29-2026 Signed by Governor as **Act No. 486**; effective 05-29-2026.

This bill seeks to amend the education law, to add authority to the Board of Regents to

set policy relative to accreditation of all public postsecondary institutions. The bill also enacts a new chapter of education law related to accreditation of public postsecondary institutions. The new chapter requires coordination of accreditation policies between the Board of Regents, the four management boards in the state, as well as all the public postsecondary institutions for both institutional accreditation as well as programmatic accreditation. [Senate Committee Amendment No. 1870](#) clarified the section relative to specialized accreditation to require the Board of Regents to identify a list of units, programs, and professional schools that require specialized accreditation and a corresponding list of recognized accreditors. [House Floor Amendment No. 5289](#) made technical corrections to the citation numbers.

SB 401

K. Talbot [R-10], River Ridge

Insurance

Provides for a Prescription Drug Affordability Board that sets the maximum cost for each prescription drug sold in Louisiana. *[08-01-2026]*

02-27-2026	Prefiled and referred to committee.
03-25-2026	Considered, then voluntarily deferred for one week.
04-01-2026	Amended, then reported favorably.
04-07-2026	Committee amendments adopted; bill engrossed; Passed to 3 rd reading and floor vote.
04-08-2026	Called for debate; returned to the calendar, subject to call.
04-15-2026	Called; amended, then passed the Senate (37-0); Bill re-engrossed; sent to the House.
04-20-2026	Received in the House; committee referral pending.
04-21-2026	Referred to the House Committee on Insurance.
04-29-2026	Amended, then reported favorably.
05-05-2026	Committee amendments adopted; bill re-engrossed; Recommitted to House Committee on Governmental Affairs.
05-12-2026	Amended, then reported favorably; Referred to the Legislative Bureau.
05-13-2026	Reported without Bureau amendments.
05-18-2026	Passed to 3 rd reading and final passage.
05-19-2026	Amended, then passed House (96-0); returned to the Senate; Received in the Senate with House amendments.
05-20-2026	Pending Senate concurrence with House amendments.
05-25-2026	Senate rejected House amendments (36-0); Referred to Conference Committee.
05-26-2026	Notice of Senate conferees: Talbot, Bass, Myers; Notice of House conferees: C. Henry, Firment, Miller.
05-29-2026	Conference Committee Report received; lies over; Rule suspended; Senate adopted Conference Committee Report (36-0).
05-31-2026	House adopted Conference Committee Report (88-7).
06-01-2026	Enrolled; signed by Senate President and House Speaker.
06-02-2026	Sent to Governor for executive approval.
06-12-2026	Signed by Governor as <u>Act No. 915</u> ; effective 01-01-2027.

This bill seeks to amend the insurance law to create a new entity – the Prescription Drug Affordability Board (PDAB). The bill provides for the membership, powers and duties of the board, and authorizes enforcement under the state unfair trade practices

and consumer protection law. The bill empowers the board to establish a critical drug list, requires manufacturers of those drugs to submit price information to the board, and provides an exception to the public records law for that confidential information. The bill also requires any person engaged in any form of prescription drug marketing to a healthcare provider with the intent for the provider to prescribe the drug to his patient to also provide price information to the prescriber. One of the nine members of the board shall be the president of the state pharmacy board or his designee, and all the members shall have a significant pharmacy or healthcare background. [Senate Committee Amendment No. 1641](#) inserted 35 sets of amendments, 33 of which were technical and non-substantive. The primary substantive amendment added new sections requiring drug manufacturers to notify the PDAB of when the wholesale acquisition price of a brand name drug increases by more than the percentage change from the previous year in the prescription drug component of the federal Consumer Price Index (CPI), or when the wholesale acquisition cost of a generic or biosimilar drug increases by more than \$100 from the previous year or \$200 total per pricing unit during any 12-month period, or when a new drug is introduced for distribution in the state that has a wholesale acquisition cost greater than the amount that causes the drug to be considered a specialty drug under the Medicare Part D drug program. The amendment contains time frames for reporting as well as information and data to be included in such reports. The state insurance and health departments may audit those reports. The PDAB shall produce and submit an annual report identifying the 25 costliest drugs in the state, the 25 most prescribed drugs in the state, and the 25 drugs with the highest year-over-year cost increases. Finally, the PDAB shall terminate on June 30, 2028 unless re-authorized by the legislature. [Senate Floor Amendment No. 1859](#) clarified the definition of ‘manufacturer.’ [Senate Floor Amendment No. 2009](#) inserted a provision within the requirement for the manufacturer to submit confidential information such that the manufacturer shall first submit their confidential and proprietary information to the insurance commissioner who shall confirm the confidential and proprietary nature of that information before transferring that information to the board. [Senate Floor Amendment No. 1917](#) removed generic and biosimilar drugs from the reporting requirement unless those drugs have a wholesale acquisition cost of \$100 or more for a unit cost or a unit cost increase of more than 200% in any 12-month period. [Senate Floor Amendment No. 2203](#) added four sets of amendments, of which one is technical. One amendment added two terms with their definitions: research and development expenditures and wholesale acquisition cost. Another amendment added a member of a patient advocacy group to the board. The substantive amendment prohibits any member of the board from having any type of relationship with any stakeholder or any other conflict of interest. [House Committee Amendment No. 4578](#) inserted 15 sets of amendments, including definitions of the terms ‘enrollee’ and ‘rebate’, the exclusion of any brand name drug or biologic which is indicated for one or more rare diseases from the board’s study, additional clarifying provisions related to the selection of drugs for study (no more than 10 drugs, and the wholesale prices of which have increased 15% or more during the prior calendar year), as well as clarifying provisions related to the confidentiality of reported information and protection from public records law. The final provision related to exemption from public records law resulted in the dual referral of the bill to the House Committee on Governmental Affairs. [House Committee Amendment No. 5431](#) made technical corrections to the public record exclusions in the previous committee amendment. [House Floor Amendment No. 5542](#) clarified the requirement for drug manufacturers to report certain cost information for their prescription drugs, and further,

authorized the imposition of fines for failure to submit such reports. The amendment also requires the insurance department to develop a webpage on its website to post the cost information reported by the drug manufacturers with the exception of certain confidential information. [Conference Committee Report No. 4460](#) retained some of the House committee amendments and rejected some of the same, and further, retained the House floor amendment and added four new amendments.

[SB 413](#) P. McMath [R-11], Covington Health & Welfare
Provides relative to the Louisiana State Board of Medical Examiners. [08-01-2026]
03-18-2026 Filed; committee referral pending.
03-23-2026 Referred to committee.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the state medical board law, to require that board to appoint an executive director who is not a physician licensed by that board.

[SB 434](#) M. Fesi [R-20], Houma Health & Welfare
Provides relative to foods that contain vaccines. [08-01-2026]
03-30-2026 Filed; committee referral pending.
03-31-2026 Referred to committee.
04-22-2026 Presented, then deferred for one week.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the food, drug, and cosmetic law by amending the definition of “drug” to include any food intended for human consumption that intentionally contains a vaccine or vaccine material, and also by adding the term “vaccine or vaccine material” and its definition.

[SB 483](#) M. Reese [R-30], Leesville Health & Welfare
Provides relative to the Louisiana Board of Pharmacy. [gov. sig.]
03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-22-2026 Amended, then reported favorably.
04-27-2026 Committee amendments adopted; bill engrossed;
Passed to 3rd reading and floor vote.
04-28-2026 Passed the Senate (37-0); sent to the House.
04-29-2026 Received in the House; committee referral pending.
05-05-2026 Referred to the House Committee on Health & Welfare.
05-19-2026 On agenda but not considered.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the pharmacy practice act, more specifically the sections relative to board membership and the qualifications for board members. The bill also provides for term limits for board members. The bill allocates some of the 17 member positions to certain healthcare provider settings. Instead of the current method of nominating two pharmacists from each of the eight pharmacy districts, the bill provides for nominating one pharmacist from each of the eight pharmacy districts. In addition, the other eight non-consumer positions would be allocated as follows: three pharmacists practicing in sterile compounding practices, one pharmacist in a chain

pharmacy setting, one pharmacist in a hospital pharmacy setting, one pharmacist in an independent pharmacy setting, one physician, and one registered nurse. The eight member positions that are specifically allocated would not be subject to the nomination process but would be appointed at large by the governor, as is the consumer position. All member terms are for six years, and members may not serve more than two consecutive terms. [Senate Committee Amendment No. 2563](#) changed the physician position to either a pharmacist or practitioner to represent Districts 1, 2, 3, and 6, and then changed the nurse position to either a pharmacist or practitioner to represent Districts 4, 5, 7, and 8. The amendment also removed the word ‘sterile’ from ‘sterile compounding.’ Finally, the implementation procedure was changed to require all members to be removed on 6-30-2026, and then for the governor to appoint 17 members on 7-1-2026 which may include the reappointment of any existing member.

[SB 516](#) B. Myers [R-23], Lafayette Health & Welfare
Provides for licensure requirements for hospitals that provide emergency services.
[08-01-2026]

03-31-2026 Filed; committee referral pending.
04-01-2026 Referred to committee.
04-15-2026 Voluntarily deferred indefinitely.
06-01-2026 Bill died when legislature adjourned *sine die*.

This bill seeks to amend the hospital licensing law. No hospital license shall be issued or renewed on or after 01-01-2027 unless the hospital maintains a minimum of 30 inpatient beds plus a minimum of 15 emergency department beds plus complies with the federal Emergency Treatment and Active Labor Act of 1986 (EMTALA). However, these requirement shall not apply to five specifically identified facilities – a hospital that is an off-site campus of a main hospital campus; a hospital designated as a critical access hospital under federal law; a rural hospital as defined in existing state law; a physician-owned hospital that does not provide 24-hour emergency services; or a hospital that is owned by a city, parish, or other political subdivision of the state.

[#SB: 15]

Concurrent Resolutions

[SCR 2](#) B. Myers [R-23], Lafayette Health & Welfare
Amends rules relative to certain licensure requirements of hospitals. [08-01-2026]

03-09-2026 Filed.
03-10-2026 Referred to committee.
03-18-2026 Reported favorably.
03-23-2026 Engrossed; passed to 3rd reading and floor vote.
03-24-2026 Passed Senate (38-3); sent to the House;
 Received by the House; committee referral pending.
03-25-2026 Referred to the House Committee on Health & Welfare.
04-29-2026 Reported favorably; referred to Legislative Bureau.
05-05-2026 Reported without Bureau amendment.
05-06-2026 Passed to 3rd reading and final passage.
05-13-2026 Passed the House (82-0); returned to the Senate;
 Received in the Senate without House amendments.

05-14-2026 **Enrolled**; signed by Senate President.
05-18-2026 Signed by House Speaker.
05-20-2026 Sent to the Secretary of State.

Amends a recent rule from the state health department relative to architectural standards in the hospital licensing rules. Whereas the recent rule requires compliance with the 2014 edition of Facility Guidelines Institute's Guidelines for Design and Construction of Hospitals and Outpatient Facilities, this proposed legislative resolution will amend that rule to require compliance with the most recent edition of that architectural standard.

SCR 37 M. Fesi [R-20], Houma Health & Welfare
Requests the surgeon general to develop a plan relative to informed consent for vaccinations.

04-20-2026 Filed; committee referral pending.
04-21-2026 Referred to committee.
04-28-2026 Amended, then reported favorably.
04-29-2026 Committee amendments adopted; resolution engrossed;
Passed to 3rd reading and floor vote; rule suspended;
Passed Senate (25-5); sent to the House.
05-05-2026 Received in the House; committee referral pending.
05-06-2026 Referred to the House Committee on Health & Welfare.
05-19-2026 Reported favorably.
05-20-2026 Passed to 3rd reading and final passage.
05-27-2026 Passed the House (66-27); returned to the Senate;
Received in the Senate without amendment.
05-28-2026 **Enrolled**; signed by Senate President and House Speaker.
06-01-2026 Sent to the Secretary of State.

This resolution requests the state surgeon general to review the state's existing medical consent law and the administrative code list of procedures requiring medical consent (which does not currently include vaccinations) to determine whether there are any gaps in law or rule and to submit his findings to the legislature. Senate Committee Amendment No. 2714 removed the language relative to vaccinations to broaden the request. The state's Medical Disclosure Panel, which is the entity responsible for identifying specific medical procedures requiring medical consent, has not met since 2018. Therefore, the surgeon general is requested to review the medical consent law and inform the legislature of any required updates.

[#SCR: 2]