SLS 24RS-330 ENGROSSED

2024 Regular Session

SENATE BILL NO. 106

BY SENATORS BARROW, DUPLESSIS, EDMONDS AND TALBOT

HEALTH CARE. Provides relative to obesity treatment. (8/1/24)

1	AN ACT
2	To enact R.S. 22:1047, relative to obesity treatment; to require coverage for severe obesity
3	treatments; to provide for requirements for coverage; to provide for definitions; to
4	provide for applicability; and to provide for related matters.
5	Be it enacted by the Legislature of Louisiana:
6	Section 1. R.S. 22:1047 is hereby enacted to read as follows:
7	§1047. Required coverage for severe obesity treatment
8	A. A health insurance issuer offering health coverage plans in this state
9	that provide hospital, medical, or surgical benefits for individuals covered
10	under a respective plan shall provide coverage for medically necessary expenses
11	for diseases and conditions caused by severe obesity and treatment in
12	accordance with this Section.
13	B. Treatment shall include but not be limited to bariatric surgery,
14	recognized by the American Society for Metabolic and Bariatric Surgery.
15	Treatment shall also include pre-operative psychological screening and
16	counseling, behavior modification, nutritional counseling, and post-operative
17	follow-up, overview, and counseling of dietary, exercise, and lifestyle changes.

1	C. The covered insured shall be at least eighteen years of age to be
2	eligible for bariatric surgery coverage. Prior to the treatment required by this
3	Section, a health insurance issuer may require a covered person successfully
4	complete a pre-operative period which may include counseling, nutritional
5	education, and other covered services to assist in preparation and evaluation for
6	successful treatment.
7	D.(1) The prescribing physician shall issue a written order stating that
8	treatment is medically necessary and in accordance with the patient
9	qualifications and treatment standards set forth by the American Society for
10	Metabolic and Bariatric Surgery or the American College of Surgeons.
11	(2) A health insurance issuer may restrict covered services pursuant to
12	this Section to those provided in facilities holding accreditation by the American
13	College of Surgeons and the American Society for Metabolic and Bariatric
14	Surgery's Metabolic and Bariatric Surgery Accreditation.
15	E.(1) A health insurance issuer may require that all covered services
16	pursuant to this Section receive prior authorization from the issuer.
17	(2) Nothing in this Section shall be interpreted to require a health
18	insurance issuer to provide coverage for injectable drugs used to lower glucose
19	levels or any other drugs prescribed for weight loss. A health insurance issuer
20	may limit benefits provided in this Section to no more than one surgical
21	procedure per lifetime.
22	F. For purposes of this Section, the following terms shall have the
23	following meanings:
24	(1) "Body mass index" means a practical marker used to assess the
25	degree of obesity, calculated by dividing the weight in kilograms by the height
26	in meters squared.
27	(2) "Health coverage plan" means any hospital, health, or medical
28	expense insurance policy, hospital or medical service contract, employee welfare
29	benefit plan, contract, or other agreement with a health maintenance

SLS 24RS-330 ENGROSSED
SB NO. 106

1 organization or a preferred provider organization, health and accident 2 insurance policy, or any other insurance contract of this type in this state, 3 including a group insurance plan, and a self-insurance plan. "Health coverage 4 plan" does not include a plan providing coverage for excepted benefits defined in R.S. 22:1061, limited benefit health insurance plans, and short-term policies 5 that have a term of less than twelve months or the Office of Group Benefits 6 7 programs. 8 (3) "Severe obesity" means either of the following: 9 (a) A body mass index equal to or greater than forty kilograms per meter 10 squared. 11 (b) A body mass index equal to or greater than thirty-five kilograms per 12 meter squared along with an associated comorbidity including but not limited 13 to hypertension, cardiopulmonary conditions, sleep apnea, or diabetes. Section 2. This Act shall apply to any new policy, contract, program, or health 14 coverage plan issued on and after January 1, 2025. Any policy, contract, or health coverage 15 16 plan in effect prior to January 1, 2025, shall convert to conform this Act on or before the renewal date, but no later than January 1, 2026. 17

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

DIGEST 2024 Regular Session

SB 106 Engrossed

gular Session Barrow

<u>Proposed law</u> requires any health insurance issuer that offers health coverage plans in La. that provide hospital, medical, or surgical benefits to provide coverage for certain severe obesity treatments.

<u>Proposed law</u> requires the covered insured to be at least 18 years of age to be eligible for bariatric surgery coverage. <u>Proposed law</u> provides an issuer may request a covered person successfully complete a pre-operative period prior to bariatric surgery.

<u>Proposed law</u> provides an issuer may restrict services for bariatric surgery to certain facilities.

<u>Proposed law</u> provides that issuers may require prior authorization for bariatric surgery.

<u>Proposed law</u> provides this coverage does not apply to injectable drugs to lower glucose levels or any other prescribed weight loss drugs. <u>Proposed law</u> provides coverage for bariatric surgery may be limited to once per lifetime.

<u>Proposed law</u> requires the prescribing physician to issue a written order verifying certain information.

Proposed law defines "body mass index", "health coverage plan", and "severe obesity".

<u>Proposed law</u> applies to any new policy, contract, program, or health coverage plan issued on and after Jan. 1, 2025, and requires any policy, contract, or health coverage plan in effect prior to Jan.1, 2025, to convert to conform to <u>proposed law</u> on or before the renewal date, but no later than Jan.1, 2026.

Effective August 1, 2024.

(Adds R.S. 22:1047)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the original bill

- 1. Makes technical changes.
- 2. Removes weight loss and exercise regimens from the list of treatments.
- 3. Provides an issuer may require certain pre-operative treatment prior to bariatric surgery.
- 4. Provides an issuer may restrict services for bariatric surgery to certain facilities.
- 5. Provides an issuer may require prior authorization for bariatric surgery.
- 6. Provides this coverage does not apply to injectable drugs to lower glucose levels or other drugs prescribed for weight loss.
- 7. Provides bariatric treatment may be limited to once per lifetime.
- 8. Provides for applicability.