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 DIGEST

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SB 150 Reengrossed

2021 Regular Session

Barrow

Proposed law defines "severe obesity" as a body mass index (BMI) of at least 40 kilograms per meter squared or a BMI of at least 35 kilograms per meter squared along with a comorbidity or existing medical condition such as hypertension, cardiopulmonary conditions, sleep apnea, or diabetes.

Proposed law requires the Office of Group Benefits (OGB) to offer a provision stating that benefits shall be payable for the treatment of severe obesity through gastric bypass surgery, sleeve gastrectomy, duodenal switch, single anastomosis duodeno-ileostomy with sleeve, or other methods recognized by the American Society for Metabolic and Bariatric Surgery as effective for the long-term reversal of severe obesity. Proposed law requires that the employee receiving the benefit have a BMI of at least 40 or a BMI of at least 35 with two or more comorbidities.

Proposed law limits the benefits to 300 surgeries per year and applies only to active or retired state employees who have participated in an OGB self-funded health plan for at least one year prior to the surgery or other treatment method and prior authorization. Proposed law requires the employee to comply with all OGB requirements during the pre-operative period which shall be no less than four months.

Proposed law provides that the benefits established therein do not include coverage for skin removal surgery.

Proposed law provides that the OGB benefit will be restricted to services provided in facilities holding accreditation by the American College of Surgeons and the American Society for Metabolic and Bariatric Surgery's Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program.

Proposed law stipulates that the coverage of bariatric surgery provided for in proposed law shall require prior authorization.

(Adds R.S. 42:860)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Health and Welfare to the original bill

1. Limits the applicability to an active state employee or retired state employee who has participated in an OGB health plan for at least one year prior to the surgery.
2. Requires the employee to comply with all OGB requirements during the pre-operative period.
3. Limits the benefits to a maximum of 300 surgeries per year.
4. Provides that proposed law does not include coverage or other benefits for skin removal surgery.
5. Makes technical changes.

Senate Floor Amendments to engrossed bill

1. Limit applicability to OGB self-funded plans and require participation one year prior to the prior authorization.
2. Require a BMI of at least 40 or at least 35 with two or more comorbidities.
3. Specify that the pre-operative period shall be no less than four months.
4. Limit the benefit to services provided by facilities holding certain accreditation.
5. Make technical changes.

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Health and Welfare to the reengrossed bill:

1. Make technical corrections.