The original instrument was prepared by Martha Hess. The following digest, which does not constitute a part of the legislative instrument, was prepared by Brandi Cannon.

DIGEST

SB 150 Reengrossed

2021 Regular Session

Barrow

<u>Proposed law</u> defines "severe obesity" as a body mass index (BMI) of at least 40 or a BMI of at least 35 along with comorbidity or existing medical conditions such as hypertension, cardiopulmonary conditions, sleep apnea, or diabetes.

<u>Proposed law</u> 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. <u>Proposed law</u> requires the employee receiving the benefit to have a body mass index greater than or equal to 40 kg per meter squared, or greater than or equal to 35 kg per meter squared with two or more co-morbidities.

<u>Proposed law</u> 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. <u>Proposed law</u> 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 do not include coverage for skin removal surgery.

<u>Proposed law</u> 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 (MBSAQIP).

Proposed law provides that the coverage of bariatric surgery shall require prior authorization.

Effective August 1, 2021.

(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 <u>proposed law</u> 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.