SENATE FLOOR AMENDMENTS

2015 Regular Session

Amendments proposed by Senator Heitmeier to Reengrossed House Bill No. 260 by Representative Alfred Williams

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AMENDMENT NO. 1

2	On page 1, line 2, between "enact" and "R.S. 40:1299.4.3" insert the following:
3	"R.S. 22:1055 and"
4	AMENDMENT NO. 2
5 6	On page 1, line 2, after "services for" delete the remainder of the line and delete line 3 in its entirety and insert in lieu thereof the following:
7	"certain persons; to establish a sickle cell patient navigator program and provide"
8	AMENDMENT NO. 3
9	On page 1, line 7, between "funds" and the semicolon ";" insert the following:
10 11	"to provide for health insurance coverage for the treatment of morbid obesity and to provide for definitions; to provide for an effective date;"
12	AMENDMENT NO. 4
13	On page 1, between lines 8 and 9, insert the following:
14 15 16	"Section 1. R.S. 22:1055 is hereby enacted to read as follows: §1055. Health insurance coverage for the treatment of morbid obesity; definitions
17	A. As used in this Section, the following definitions shall apply:
18 19 20	(1) "Body mass index" means a practical marker used to assess the degree of obesity and is calculated by dividing the weight in kilograms by the height in meters squared.
21 22 23	(2) "Morbid obesity" means the condition that exists when a person has a body mass index greater than forty kilograms per meter squared and also has the two comorbidity factors of diabetes and hypertension.
24 25 26 27 28 29 30 31 32 33 34 35 36	B.(1) Any group insurance plan providing comprehensive major medical benefits which is issued or renewed in this state on or after January 1, 2017, or, notwithstanding the provisions of R.S. 22:1016, any prepaid entity that participates in the Louisiana Medicaid Program shall provide coverage for the medically necessary expenses of the diagnosis and treatment of morbid obesity as defined in this Section, including but not limited to bariatric surgery, physician office visits, health and behavior assessments, nutrition education, and patient self-management education training. This provision shall not apply to the Office of Group Benefits or to small group insurance plans or to grandfathered large group plans as defined by the Patient Protection and Affordable Care Act, Public Law 111-148, as amended by the Health Care and Education Reconciliation Act, Public Law 111-152.
3 / 38	(2) The coverage required pursuant to this Section for bariatric surgery shall be limited to facilities of surgical services that are accredited

2 3 4 5 6	Improvement Program of the American College of Surgeons and the American Society for Metabolic Bariatric Surgery as a comprehensive bariatric facility. A health insurance issuer providing coverage pursuant to this Section may limit such coverage to services provided by a specific limited network of providers based on quality and efficiency factors.
7 8 9 10 11	C. The Heads Up Program, which operates as a partnership between the Office of Group Benefits and the Pennington Biomedical Research Center, shall continue to serve one hundred surgical participants annually through June 30, 2017, or beyond, at the discretion of the Office of Group Benefits.
12 13 14	D. A health insurance issuer shall only be required to cover the services described in this Section that are provided to persons between the ages of seventeen and sixty-five years of age.
15 16	E. For coverage of any surgery under this Section, a health insurance issuer may establish the following limitations on such coverage:
17 18 19 20 21 22	(1) Require that the insured and his provider provide documented evidence that he has exhausted all reasonable, nonsurgical options prior to seeking surgery as provided by the Centers for Medicare and Medicaid Services National Coverage Determination for Bariatric Surgery. Such options shall include but not be limited to diet, exercise, and approved medications.
23 24 25	(2) Establish guidelines for the insured and his provider to follow that ensure that candidates for surgery receive comprehensive medical and behavioral clearance from the provider prior to being approved for surgery.
26 27 28	(3) Limit coverage for surgery to one surgery per lifetime for any insured, unless surgery is required due to complications due to a prior surgery covered in accordance with this Section.
29 30 31	(4) Limit the benefit payable for any surgical procedure fifteen thousand dollars per lifetime. Any additional amounts payable for such surgery shall be the responsibility of the insured.
32 33 34 35 36	F. (1) A health insurance issuer providing coverage pursuant to this Section may limit the benefit payable for nonsurgical services described in this Section to not less than one thousand five hundred dollars per policy year. For purposes of this Paragraph, "nonsurgical services" shall include any of the following:
37 38	(a) Physician office visits related to a morbid obesity diagnosis and treatment and subsequent follow-up visits.
39	(b) Health and behavior assessments.
40	(c) Nutrition education.
41	(d) Patient self-management education and training.
42 43	(2) The benefit limit of Paragraph (1) of this Subsection shall not apply to treatment for the comorbidity factors of hypertension or diabetes.
44 45 46 47	(3) A health insurance issuer providing coverage pursuant to this Section may limit the benefit payable for drugs prescribed for weight loss used in the treatment of morbid obesity prior to surgery to not less than one thousand eight hundred dollars per policy year

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1	(4) The annual benefit limits described in this Subsection shall be in
2	addition to any cost sharing requirements payable by the insured in
3	accordance with the applicable policy of insurance.
4 5	G. A health insurance issuer providing coverage under this Section may exclude coverage for the following items:
6	(1) Any membership or access fee charged by a provider.
7	(2) Meals or meal supplements."
8	AMENDMENT NO. 5
9	On page 1, line 9, change "Section 1." to "Section 2."
10	AMENDMENT NO. 6
11	On page 2, below line 29, add the following:
12 13	"Section 3. The provisions of Section 1 of this Act shall become effective on January 1, 2017."
14	AMENDMENT NO. 7
15	On page 3, line 1, change "Section 2." to "Section 4."