

FIRST REGULAR SESSION

# HOUSE BILL NO. 84

## 93RD GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVE BOYKINS.

Pre-filed December 10, 2004 and copies ordered printed.

STEPHEN S. DAVIS, Chief Clerk

0492L.011

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### AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to insurance coverage for obesity.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be  
2 known as section 376.1240, to read as follows:

**376.1240. 1. As used in this section, the following terms mean:**

2 **(1) "Body mass index", the relationship between weight and height used to assess**  
3 **health risk related to excess weight based on the mathematical formula that is expressed**  
4 **as weight in kilograms divided by height in meters squared, or weight in pounds divided**  
5 **by height in inches squared and multiplied by 703;**

6 **(2) "Health benefit plan", the same meaning as such term is defined in section**  
7 **376.1350;**

8 **(3) "Health carrier", the same meaning as such term is defined in section 376.1350;**

9 **(4) "Morbid obesity":**

10 **(a) A weight which is at least one hundred pounds over or twice the ideal weight**  
11 **for frame, age, height, and gender as specified in the most recent Metropolitan Life**  
12 **Insurance tables;**

13 **(b) A body mass index equal to or greater than forty kilograms per meter squared;**

14 **(c) A body mass index equal to or greater than thirty-five kilograms per meter**  
15 **squared along with comorbidity or existing medical conditions such as hypertension,**  
16 **cardiopulmonary conditions, sleep apnea, or diabetes.**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

17           **2. Each health carrier or health benefit plan that offers or issues health benefit**  
18 **plans which are delivered, issued for delivery, continued or renewed on or after January**  
19 **1, 2006, shall offer coverage for the treatment of morbid obesity by such methods as may**  
20 **be recognized by the National Institutes of Health as effective for the long-term reversal**  
21 **of morbid obesity when:**

22           **(1) Nonsurgical treatment of the morbid obesity supervised by a physician has been**  
23 **unsuccessful for at least eighteen months;**

24           **(2) At least two physicians concur in the determination that surgical treatment of**  
25 **the morbid obesity is medically necessary.**

26           **3. If the policyholder or other purchaser of the policy, plan, or contract elects not**  
27 **to purchase coverage under this section, the health carrier or health benefit plan shall not**  
28 **be required to notify the purchaser in any renewal, reinstatement, or modified policy,**  
29 **contract, or plan as to the availability of the optional coverage. However, the policyholder**  
30 **or other purchaser may request the optional coverage in writing on any anniversary date**  
31 **of the policy, plan, or contract.**

32           **4. Nothing in this section shall be construed to deny or restrict in any way any**  
33 **existing right or benefit to coverage and treatment for obesity under any existing law,**  
34 **policy, plan, or contract.**

35           **5. Nothing in this section shall be construed to allow limits of liability of coverage**  
36 **for morbid obesity which prevents the policyholder from accessing medically necessary and**  
37 **appropriate treatment for morbid obesity as recommended by a licensed physician,**  
38 **chiropractor, or registered and licensed dietician.**

39           **6. The provisions of this section shall not apply to a supplemental insurance policy,**  
40 **including a life care contract, accident-only policy, specified disease policy, hospital policy**  
41 **providing a fixed daily benefit only, Medicare supplement policy, long-term care policy,**  
42 **short-term major medical policy of six months' or less duration, or any other supplemental**  
43 **policy.**