

SECOND REGULAR SESSION

# HOUSE BILL NO. 1493

## 97TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE STREAM.

5484L.01I

D. ADAM CRUMBLISS, Chief Clerk

### AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to the treatment of eating disorders.

*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 known as section 376.845, to read as follows:

**376.845. 1. Each health carrier or health benefit plan that offers or issues health benefit plans which are delivered, issued for delivery, continued, or renewed in this state on or after January 1, 2015, shall provide coverage for the diagnosis and treatment of eating disorders.**

**2. A health carrier or health benefit plan offering group health insurance coverage shall not:**

**(1) Deny eligibility or continued eligibility to an individual to enroll or renew coverage under the terms of the plan solely for the purpose of avoiding the requirements of this section;**

**(2) Deny coverage for treatment of eating disorders, including medical, psychological, nutritional, and psychiatric coverage for inpatient, residential, partial hospitalization and intensive outpatient treatment and follow-up outpatient care of eating disorders, when such treatment is necessary in accordance with the client's personal physician in consultation with the Practice Guidelines for the Treatment of Patients with Eating Disorders, as most recently published by the American Psychiatric Association;**

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.

16           (3) Provide monetary payments, rebates, or other benefits to individuals to  
17 encourage such individuals to accept less than the minimum protections available under  
18 this section;

19           (4) Penalize or otherwise reduce or limit the reimbursement of a provider because  
20 such provider provided care to an individual participant or beneficiary in accordance with  
21 this section;

22           (5) Provide monetary or other incentives to a provider to induce such provider to  
23 provide care to an individual participant or beneficiary in a manner inconsistent with this  
24 section; or

25           (6) Deny continued eligibility to enroll or renew coverage under the terms of the  
26 plan to an individual participant or beneficiary solely because the individual was  
27 previously found to have an eating disorder or received medical, psychological, nutritional,  
28 or psychiatric treatment for an eating disorder or co-morbid disorders.

29           3. The coverage required under this section shall provide access to medical,  
30 psychological, nutritional, and psychiatric treatment under the plan and shall provide  
31 coverage for integrated care and treatments as prescribed by medical, psychological,  
32 nutritional, and psychiatric health care professionals, including but not limited to nutrition  
33 or dietician counseling and services, physical therapy, medical monitoring, psychiatric  
34 monitoring, and coverage for inpatient, residential, partial hospitalization and intensive  
35 outpatient treatment and follow-up outpatient care, and any other treatment not included  
36 in this section but proscribed as necessary by the client's treatment team.

37           4. For the purposes of this section, the following terms shall mean:

38           (1) "Eating disorders", anorexia nervosa, bulimia nervosa, binge eating disorder,  
39 eating disorders not otherwise specified, and any other severe eating disorders contained  
40 in the most recent version of the Diagnostic and Statistical Manual of Mental Disorders  
41 published by the American Psychiatric Association;

42           (2) "Health benefit plan", the same meaning as such term is defined in section  
43 376.1350;

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

45           (4) "Treatment team", any and all medical, psychological, nutritional, and  
46 psychiatric providers.

47           5. The health care service required by this section shall not be subject to any  
48 greater deductible or co-payment than other health care services provided by the health  
49 benefit plan. This section shall be standalone and not limit coverage, inclusive of days  
50 approved for treatment, for eating disorders. The determination of coverage shall be made  
51 in conjunction with the health care service provider and the client's treatment team.

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

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