

SECOND REGULAR SESSION  
SENATE COMMITTEE SUBSTITUTE FOR

# SENATE BILL NO. 769

97TH GENERAL ASSEMBLY

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Reported from the Committee on Small Business, Insurance and Industry, April 1, 2014, with recommendation that the Senate Committee Substitute do pass.

5560S.02C

TERRY L. SPIELER, Secretary.

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## AN ACT

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

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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 known as section 376.845, to read as follows:

**376.845. 1. For the purposes of this section the following terms shall mean:**

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

(2) "Health benefit plan", shall have the same meaning as such term is defined in section 376.1350; however, for purposes of this section "health benefit plan" does not include a supplemental insurance policy, including a life care contract, accident-only policy, specified disease policy, hospital policy providing a fixed daily benefit only, Medicare supplement policy, long-term care policy, short-term major medical policy of six months or less duration, or any other supplemental policy;

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

(4) "Medical care", health care services needed to diagnose, prevent, treat, cure, or relieve physical manifestations of an eating disorder, and shall include inpatient hospitalization, partial

21 hospitalization, residential care, intensive outpatient treatment, follow-  
22 up outpatient care and counseling;

23 (5) "Nutritional care", counseling and consultation services  
24 provided by a licensed and registered dietitian;

25 (6) "Pharmacy care", counseling and consultation services  
26 provided by a licensed and Registered Dietitian. "Pharmacy care"  
27 includes medications used to address symptoms of an eating disorder  
28 prescribed by a licensed physician, and any health-related services  
29 deemed medically necessary to determine the need or effectiveness of  
30 the medications, but only to the extent that such medications are  
31 included in the insured's health benefit plan;

32 (7) "Psychiatric care", direct or consultative services provided by  
33 a psychiatrist licensed in the state in which the psychiatrist practices,  
34 and shall include inpatient hospitalization, partial hospitalization,  
35 residential care, intensive outpatient treatment, follow-up outpatient  
36 care and counseling;

37 (8) "Therapy", behavioral interventions provided by a therapist  
38 licensed in the state in which the therapist practices;

39 (9) "Treatment of eating disorders", care prescribed or ordered  
40 for an individual diagnosed with an eating disorder by a licensed  
41 physician, psychologist, psychiatrist, or therapist, pursuant to the  
42 powers granted under such licensed physician's, psychologist's,  
43 psychiatrist's, or therapist's license, including, but not limited to:

44 (a) Medical care;

45 (b) Psychological care;

46 (c) Psychiatric care;

47 (d) Nutritional care;

48 (e) Therapy;

49 (f) Pharmacy care.

50 2. In accordance with the provisions of section 376.1550, all  
51 health benefit plans that are delivered, issued for delivery, continued  
52 or renewed, if written inside the state of Missouri, or written outside  
53 the state of Missouri but covering Missouri residents, shall provide  
54 coverage for the diagnosis and treatment of eating disorders as  
55 required in section 376.2550.

56 3. (1) Coverage provided under this section is limited to  
57 medically necessary treatment that is ordered by a licensed treating

58 physician, psychologist, psychiatrist, or therapist, pursuant to the  
59 powers granted under such licensed physician's, psychologist's,  
60 psychiatrist's, or therapist's license, in accordance with a treatment  
61 plan.

62 (2) The treatment plan, upon request by the health benefit plan  
63 or health carrier, shall include all elements necessary for the health  
64 benefit plan or health carrier to pay claims. Such elements include, but  
65 are not limited to, a diagnosis, proposed treatment by type, frequency  
66 and duration of treatment, and goals.

67 (3) If the individual is receiving treatment for an eating  
68 disorder, a health carrier shall have the right to review the treatment  
69 plan not more than once every six months unless the health carrier and  
70 the individual's treating physician, psychologist, psychiatrist, or  
71 therapist agree that a more frequent review is necessary. Any such  
72 agreement regarding the right to review a treatment plan more  
73 frequently shall only apply to a particular individual being treated for  
74 an eating disorder and shall not apply to all individuals being treated  
75 for eating disorders by a provider. The cost of obtaining any review or  
76 treatment plan shall be borne by the health benefit plan or health  
77 carrier, as applicable.

78 (4) Coverage provided under this section shall not be subject to  
79 any limits on the number of days of medically necessary treatment,  
80 except as provided in the treatment plan.

81 4. The provisions of sections 376.1350 to 376.1399 shall apply to  
82 this section. Medical necessity determinations for treatment of eating  
83 disorders shall not solely be based upon a patient's weight or weight  
84 level. Medical necessity determinations shall consider the overall  
85 medical and psychological needs of the individual with an eating  
86 disorder. Coverage shall include integrated modalities of the various  
87 types of treatments of eating disorders as defined in this section, when  
88 such treatment is deemed medically or psychiatrically necessary by the  
89 patient's licensed physician, psychologist, psychiatrist, or therapist in  
90 accordance with the Practice Guidelines for the Treatment of Patients  
91 with Eating Disorders adopted by the American Psychiatric  
92 Association.

93 5. (1) By June 1, 2016, and every June first thereafter until 2021,  
94 the department of insurance, financial institutions and professional

95 registration shall submit a report to the general assembly regarding the  
96 implementation of the coverage required under this section. The report  
97 shall include, but shall not be limited to, the following:

98 (a) The total number of insureds diagnosed with an eating  
99 disorder;

100 (b) The total cost of all claims paid out in the immediately  
101 preceding calendar year for coverage required by this section;

102 (c) The cost of such coverage per insured per month; and

103 (d) The average cost per insured for coverage of eating  
104 disorders;

105 (2) All health carriers and health benefit plans subject to the  
106 provisions of this section shall provide the department with the data  
107 requested by the department for inclusion in the annual report.

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Bill

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