

FIRST REGULAR SESSION
SENATE COMMITTEE SUBSTITUTE FOR

SENATE BILL NO. 145

98TH GENERAL ASSEMBLY

Reported from the Committee on Small Business, Insurance and Industry, April 9, 2015, with recommendation that the Senate Committee Substitute do pass.

0796S.03C

ADRIANE D. CROUSE, Secretary.

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

(1) "Eating disorder", Pica, Rumination Disorder, Avoidant/Restrictive Food Intake Disorder, Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder, Other Specified Feeding or Eating Disorder, and any other eating disorder contained in the most recent version of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association where diagnosed by a physician, psychiatrist, or psychologist duly licensed in the state where he or she practices;

(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;

21 (4) "Medical care", health care services needed to diagnose,
22 prevent, treat, cure, or relieve physical manifestations of an eating
23 disorder, and shall include inpatient hospitalization, partial
24 hospitalization, residential care, intensive outpatient treatment, follow
25 up outpatient care, and counseling;

26 (5) "Pharmacy care", medications prescribed by a licensed
27 physician for an eating disorder and includes any health-related
28 services deemed medically necessary to determine the need or
29 effectiveness of the medications, but only to the extent that such
30 medications are included in the insured's health benefit plan;

31 (6) "Psychiatric care" and "psychological care", direct or
32 consultative services provided during inpatient hospitalization, partial
33 hospitalization, residential care, intensive outpatient treatment, follow-
34 up outpatient care, and counseling provided by a psychiatrist or
35 psychologist licensed in the state of practice;

36 (7) "Therapy", medical care and behavioral interventions
37 provided by a duly licensed physician, psychiatrist, psychologist,
38 professional counselor, licensed clinical social worker, or family
39 marriage therapist where said person is licensed or registered in the
40 states where he or she practices;

41 (8) "Treatment of eating disorders", therapy prescribed by a
42 physician, psychiatrist, or psychologist in the state where he or she
43 practices for an individual diagnosed with an eating disorder,
44 including, but not limited to therapy administered by a:

45 (a) Physician;

46 (b) Psychiatrist;

47 (c) Psychologist;

48 (d) Licensed professional counselor; or

49 (e) Licensed clinical social worker or licensed family marriage
50 therapist.

51 2. In accordance with the provisions of section 376.1550, all
52 health benefit plans that are delivered, issued for delivery, continued
53 or renewed on or after January 1, 2017, if written inside the state of
54 Missouri, or written outside the state of Missouri but covering Missouri
55 residents, shall provide coverage for the diagnosis and treatment of
56 eating disorders as required in section 376.1550.

57 3. Coverage provided under this section is limited to medically

58 necessary treatment that is ordered by a licensed treating physician,
59 psychologist, or psychiatrist pursuant to the powers granted under
60 such licensed physician's, psychologist's, or psychiatrist's license, in
61 accordance with a treatment plan.

62 4. 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 5. Coverage of the treatment of eating disorders may be subject
68 to other general exclusions and limitations of the contract or benefit
69 plan not in conflict with the provisions of this section, such as
70 coordination of benefits, and utilization review of health care services,
71 which includes reviews of medical necessity and care
72 management. Medical necessity determinations and care management
73 for the treatment of eating disorders shall consider the overall medical
74 and mental health needs of the individual with an eating disorder, shall
75 not be based solely on weight, and shall take into consideration the
76 most recent Practice Guideline for the Treatment of Patients with
77 Eating Disorders adopted by the American Psychiatric Association in
78 addition to current standards based upon the medical literature
79 generally recognized as authoritative in the medical community.

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