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

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 licensed physician, psychiatrist, psychologist, clinical social worker, licensed marital and family therapist, or professional counselor duly licensed in the state where he or she practices and acting within their applicable scope of practice 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;

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

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

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

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

(8) "Treatment of eating disorders", therapy provided by a licensed treating physician, psychiatrist, psychologist, professional counselor, clinical social worker, or licensed marital and family therapist pursuant to the powers granted under such licensed physician's, psychiatrist's, psychologist's, professional counselor's, clinical social worker's, or licensed marital and family therapist's license in the state where he or she practices for an individual diagnosed with an eating disorder.

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

3. Coverage provided under this section is limited to medically
necessary treatment that is provided by a licensed treating physician, 
psychiatrist, psychologist, professional counselor, clinical social 
worker, or licensed marital and family therapist pursuant to the 
powers granted under such licensed physician's, psychiatrist's, 
psychologist's, professional counselor's, clinical social worker's, or 
licensed marital and family therapist's license and acting within their 
applicable scope of coverage, in accordance with a treatment plan.

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

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