

SS SCS SB 145 -- TREATMENT OF EATING DISORDERS

This bill requires all health benefit plans delivered, issued for delivery, continued, or renewed on or after January 1, 2017, in accordance with current law requirements for coverage of mental health disorders, to provide coverage for the diagnosis and treatment of eating disorders. The bill limits coverage under these provisions to services provided by specified health care providers who must be acting within their applicable scope of coverage in accordance with a treatment plan. Coverage under the bill is limited to medically necessary treatment, and the treatment plan, upon request by the health benefit plan or health carrier, must include all elements necessary for a plan or carrier to pay claims. Medical necessity determinations and care management for the treatment of eating disorders must consider the overall medical and mental health needs of the individual with the eating disorder, must not be based solely on weight, and must take into consideration the most recent specified guideline adopted by the American Psychiatric Association in addition to current standards based upon the medical literature generally recognized as authoritative in the medical community. Coverage may be subject to other general exclusions and limitations of the contract or benefit plan not in conflict with the provisions of the bill.