SENATE FLOOR AMENDMENTS

2015 Regular Session

Amendments proposed by Senator Heitmeier to Reengrossed Senate Bill No. 173 by Senator Heitmeier

1 AMENDMENT NO. 1

- 2 On page 2, delete line 6 and insert "and patient self-management education training.
- 3 This"

11 12

13

14

15 16

17

18

19

20

21

22

23

24

25

26

27

28 29

30

31

- 4 AMENDMENT NO. 2
- 5 On page 2, at the end of line 12, insert "A health insurance issuer providing coverage
- 6 pursuant to this Section may limit such coverage to services provided by a specific
- 7 <u>limited network of providers based on quality and efficiency factors."</u>
- 8 AMENDMENT NO. 3
- 9 On page 2, after line 20, insert the following: 10 "D. A health insurance issuer sha
 - "D. A health insurance issuer shall only be required to cover the services described in this Section to persons between the ages of seventeen and sixty-five years of age.
 - E. For coverage of any surgery under this Section, a health insurance issuer may establish the following limitations on such coverage:
 - (1) Require that the insured and his provider provide documented evidence that he has exhausted all reasonable, nonsurgical options prior to seeking surgery as provided by the Centers for Medicare and Medicaid Services National Coverage Determination for Bariatric Surgery. Such options shall include but not be limited to diet, exercise, and approved medications.
 - (2) Establish guidelines for the insured and his provider to follow that ensure that candidates for surgery receive comprehensive medical and behavioral clearance from the provider prior to being approved for surgery.
 - (3) Limit coverage for surgery to not more than one surgery per lifetime for any insured, unless surgery is required due to complications due to a prior surgery covered in accordance with this Section.
 - (4) Limit the benefit payable for any surgical procedure to not more than fifteen thousand dollars per lifetime. Any additional amounts payable for such surgery shall be the responsibility of the insured.
 - F. A health insurance issuer providing coverage under this Section may exclude coverage for the following items:
 - (1) Any membership or access fee charged by a provider.
- 32 (2) Meals or meal supplements."