

HOUSE No. 1999

The Commonwealth of Massachusetts

PRESENTED BY:

Jeffrey N. Roy

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act creating an obesity task force and pilot program.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jeffrey N. Roy</i>	<i>10th Norfolk</i>	<i>1/14/2019</i>

HOUSE No. 1999

By Mr. Roy of Franklin, a petition (accompanied by bill, House, No. 1999) of Jeffrey N. Roy for legislation to establish a task force (including members of the General Court) and pilot program to examine the impact of obesity in the Commonwealth. Public Health.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-First General Court
(2019-2020)**

An Act creating an obesity task force and pilot program.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. There is hereby established a Task Force on the Impacts on Obesity. The

2 task force shall be chaired by the president of the senate or their designee and the speaker of the

3 house of representatives or their designee, and shall consist of the following members: the senate

4 chair of the joint committee on health care finance, the house chair of the joint committee on

5 health care finance, the senate chair of the joint committee on public health, the house chair of

6 the joint committee on public health committee, the Secretary of health and human services or

7 their designee, the commissioner of public health or their designee, the executive director of the

8 group insurance commission or their designee, the executive director of the health policy

9 commission or their designee, a representative of the Massachusetts health and hospitals

10 association, a representative of the American cancer society cancer action network, a

11 representative of the American heart and stroke association, a representative of the

12 Massachusetts health council, a representative of the alliance of ymca's, a representative of the

13 Massachusetts medical society, a representative of the Massachusetts nurses association, a

14 representative of the massachusetts health council, a representative of the Massachusetts public
15 health association, a representative of associated industries of massachuetts and a representative
16 of the Massachusetts business roundtable.

17 The commission shall:

18 1. examine the impact of obesity in the commonwealth including but not limited to
19 the cost implications for employer and employee premiums and out of pocket expenses, lost
20 productivity, impacts on wellness and health, co-morbidities and on the overall costs to the
21 health care system.

22 2. Make recommendations for guidelines and protocols relative to:

23 a. The proper screening and assessment of obesity

24 b. Education, prevention and wellness programs

25 c. Proper approded FDA treatment, medicatins and therapies

26 d. Eliminating barriers to prevention and wellness programs, education and
27 treatment programs and FDA approved medications

28 e. Understanding the society and behaviorial impacts of addressing obesity in the
29 workplace and other settings

30 3. Examine the impacts on the prevalance of co-morbidities such as cancer,
31 cardiovascular and other diseases

32 Understanding the social

33 SECTION 2. There is hereby established a pilot program to provide coverage for the
34 assessment, identification, treatment and management of obesity and related conditions,
35 including medications [§] and counseling.

36 (a) Beginning six months after the effective date of this act the group insurance
37 commission shall [§] conduct a two-year pilot program to provide coverage for the assessment
38 and identification of, treatment and management of obesity and related conditions, including
39 medications [§] and counseling. The commission shall [§] be authorized to enter into an agreement
40 with a postsecondary institution in this state for [§] pilot program management, data collection,
41 patient engagement, and other activities related [§] to the pilot program. The pilot program will
42 provide coverage of all federal Food and Drug [§] Administration approved medications for
43 chronic weight management for eligible [§] participants in conjunction with obesity prevention,
44 screening, and counseling benefits. [§]

45 (b) Participation in the pilot program shall be limited to no more than 500 individuals per
46 [§] year, to be selected in a manner determined by the commission. [§]

47 (c) Any person who has elected coverage under a state health insurance plan shall be
48 eligible to be selected to participate in the pilot program in accordance with criteria [§] established
49 by the commission which shall include, but not be limited to: [§]

50 (1) Completion of a health risk assessment through a state health insurance plan; [§]

51 (2) A body mass index: [§]

52 (a) Greater than or equal to 27 with comorbidities related to obesity; or [§]

53 (b) Greater than or equal to 30 without such comorbidities. [§]

54 (3) Consent to provide personal and medical information to a state health insurance plan;
55 [SEP]and [SEP]

56 (4) An agreement to enroll in a department approved wellness program during the plan
57 [SEP]year. [SEP]

58 (d) Eligible individuals must apply to participate in the pilot program. The individual and
59 [SEP]his or her physician shall complete and submit an obesity treatment program application [SEP]to
60 the department no later than February 1 for each year of the pilot program. The [SEP]commission
61 shall review the applications and based on [SEP]the criteria contained in subsection (d) of this
62 section, shall determine qualified [SEP]applicants for the pilot program. [SEP]

63 (e) All health care services provided pursuant to the pilot program shall be subject to the
64 [SEP]health insurance carrier's plan of benefits and policy provisions. Participants shall be
65 [SEP]responsible for all applicable copayments, coinsurance, deductibles, and out-of-pocket
66 [SEP]expenses exceeding maximum limits. [SEP]

67 (f) Participants must agree to comply with any and all terms and conditions of the pilot
68 [SEP]program including, but not limited to, participation and reporting requirements. [SEP]

69 Participants must also agree to comply with any and all requests by the department for
70 [SEP]medical and productivity information, and such agreement shall survive his or her
71 [SEP]participation in a state health insurance plan. [SEP]

72 (g) The commission shall review the results and outcomes of the pilot program beginning
73 [SEP]six months after program initiation, and shall conduct subsequent reviews every six months
74 [SEP]for the remainder of the pilot program. The commission shall provide a final report by

75 [§]December 15 of the last year of the pilot program to the chairpersons of the joint committee on
76 health care finance, the joint committee on public health, the senate committee on ways and
77 means and the house committee on ways and means.

78 The report shall include, at a minimum: [§]

79 (1) Whether patients in the pilot program experienced a reduction in body mass index,
80 and if so, the average amount of reduction; [§]

81 (2) Whether patients in the pilot program experienced reduction or elimination of
82 comorbidities, and if so, which comorbidities were reduced or eliminated;

83 (3) The total number of individuals who applied to participate in the pilot program;

84 (4) The total number of participants who enrolled in the pilot program; [§]

85 (5) The average cost to the state health insurance plan on a per-member per-month basis;

86 (6) The total cost of each participant's annual health care costs

87 (7) Recommendations on how to reduce, manage, and treat obesity in the population
88 under a state health insurance plan.

89 (h) In the event that sufficient funds become available as determined by the commission
90 to [§]provide coverage for the treatment and management of obesity and related conditions,
91 [§]including coverage of all federal Food and Drug Administration approved medication for
92 chronic weight management in conjunction with obesity prevention, screening, and [§]counseling
93 benefits, the commission shall provide such coverage to any eligible individuals [§]who have

94 elected coverage under a state health insurance plan and the pilot program shall ^{[[]]}_[SEP] be terminated
95 by the department. ^{[[]]}_[SEP]