

**HOUSE . . . . . No. 2397**

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**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>1/21/2021</i>

**HOUSE . . . . . No. 2397**

By Mr. Roy of Franklin, a petition (accompanied by bill, House, No. 2397) 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-Second General Court  
(2021-2022)**

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 Massachusetts 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 the  
19 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 approved FDA treatment, medications 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 behavioral impacts of addressing obesity in the  
29 workplace and other settings

30 f) Understanding the social, economic, racial and ethnic impacts on diabetes

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

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 and  
38 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 with  
40 a postsecondary institution in this state for pilot program management, data collection, patient  
41 engagement, and other activities related to the pilot program. The pilot program will provide  
42 coverage of all federal Food and Drug Administration approved medications for chronic weight  
43 management for eligible participants in conjunction with obesity prevention, screening, and  
44 counseling benefits.

45 b) Participation in the pilot program shall be limited to no more than 500 individuals  
46 per 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 and

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

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

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

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

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

72 (g) The commission shall review the results and outcomes of the pilot program beginning  
73 six months after program initiation, and shall conduct subsequent reviews every six months for  
74 the remainder of the pilot program. The commission shall provide a final report by December 15

75 of the last year of the pilot program to the chairpersons of the joint committee on health care  
76 finance, the joint committee on public health, the senate committee on ways and means and the  
77 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) The commission to provide coverage for the treatment and management of obesity  
90 and related conditions, including coverage of all federal Food and Drug Administration approved  
91 medication for chronic weight management in conjunction with obesity prevention, screening,  
92 and counseling benefits, the commission shall provide such coverage to any eligible individuals  
93 who have elected coverage under a state health insurance plan and the pilot program shall be  
94 terminated by the department.