

# Treatment of Eating Disorders

This Act requires 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 Act further requires that the provided coverage include a broad array of specialist services as proscribed as necessary by the patient's treatment team. Coverage under this Act is limited to medically necessary treatment and the treatment plan must include all elements necessary for a health benefit plan to pay claims. Under the Act 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 the eating disorder and shall not be based solely on weight. Coverage may be subject to other general exclusions and limitations of the contract or benefit plan not in conflict with the Act.

Submitted as:

Missouri

[SB 145](#)

Status: Signed into law on June 19, 2015.

## Suggested State Legislation

(Title, enacting clause, etc.)

- 1 Section 1. [*Treatment of eating disorders.*]  
 2 1. For the purposes of this section the following terms shall mean:  
 3 (1) "Eating disorder", Pica, Rumination Disorder, Avoidant/Restrictive Food Intake  
 4 Disorder, Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder, Other Specified  
 5 Feeding or Eating Disorder, and any other eating disorder contained in the most recent  
 6 version of the Diagnostic and Statistical Manual of Mental Disorders published by the  
 7 American Psychiatric Association where diagnosed by a licensed physician, psychiatrist,  
 8 psychologist, clinical social worker, licensed marital and family therapist, or professional  
 9 counselor duly licensed in the state where he or she practices and acting within their  
 10 applicable scope of practice in the state where he or she practices;  
 11 (2) "Health benefit plan", a policy, contract, certificate or agreement entered into, offered or  
 12 issued by a health carrier to provide, deliver, arrange for, pay for, or reimburse any of the  
 13 costs of health care services; except that, health benefit plan shall not include any  
 14 coverage pursuant to liability insurance policy, workers' compensation insurance policy,  
 15 or medical payments insurance issued as a supplement to a liability policy; however, for  
 16 purposes of this section "health benefit plan" does not include a supplemental insurance  
 17 policy, including a life care contract, accident-only policy, specified disease policy,  
 18 hospital policy providing a fixed daily benefit only, Medicare supplement policy, long-  
 19 term care policy, short-term major medical policy of six months or less duration, or any  
 20 other supplemental policy;

- 1 (3) “Health carrier”, an entity subject to the insurance laws and regulations of this state that  
2 contracts or offers to contract to provide, deliver, arrange for, pay for or reimburse any of  
3 the costs of health care services, including a sickness and accident insurance company, a  
4 health maintenance organization, a nonprofit hospital and health service corporation, or  
5 any other entity providing a plan of health insurance, health benefits or health services;  
6 except that such plan shall not include any coverage pursuant to a liability insurance  
7 policy, workers' compensation insurance policy, or medical payments insurance issued as  
8 a supplement to a liability policy;
- 9 (4) “Medical care”, health care services needed to diagnose, prevent, treat, cure, or relieve  
10 physical manifestations of an eating disorder, and shall include inpatient hospitalization,  
11 partial hospitalization, residential care, intensive outpatient treatment, follow up  
12 outpatient care, and counseling;
- 13 (5) “Pharmacy care”, medications prescribed by a licensed physician for an eating disorder  
14 and includes any health-related services deemed medically necessary to determine the  
15 need or effectiveness of the medications, but only to the extent that such medications are  
16 included in the insured's health benefit plan;
- 17 (6) “Psychiatric care” and “psychological care”, direct or consultative services provided  
18 during inpatient hospitalization, partial hospitalization, residential care, intensive  
19 outpatient treatment, follow- up outpatient care, and counseling provided by a  
20 psychiatrist or psychologist licensed in the state of practice;
- 21 (7) “Therapy”, medical care and behavioral interventions provided by a duly licensed  
22 physician, psychiatrist, psychologist, professional counselor, licensed clinical social  
23 worker, or family marriage therapist where said person is licensed or registered in the  
24 states where he or she practices;
- 25 (8) “Treatment of eating disorders”, therapy provided by a licensed treating physician,  
26 psychiatrist, psychologist, professional counselor, clinical social worker, or licensed  
27 marital and family therapist pursuant to the powers granted under such licensed  
28 physician's, psychiatrist's, psychologist's, professional counselor's, clinical social  
29 worker's, or licensed marital and family therapist's license in the state where he or she  
30 practices for an individual diagnosed with an eating disorder.
- 31 2. In accordance with the provisions of [Insert citation – mental health coverage,  
32 requirements—definitions—exclusions.], all health benefit plans that are delivered, issued for  
33 delivery, continued or renewed on or after [Insert effective date.], if written inside the state of  
34 [Missouri], or written outside the state of [Missouri] but covering [Missouri] residents, shall  
35 provide coverage for the diagnosis and treatment of eating disorders as required in section  
36 [Insert citation – mental health coverage, requirements—definitions—exclusions.]
- 37 3. Coverage provided under this section is limited to medically necessary treatment that is  
38 provided by a licensed treating physician, psychiatrist, psychologist, professional counselor,  
39 clinical social worker, or licensed marital and family therapist pursuant to the powers granted  
40 under such licensed physician's, psychiatrist's, psychologist's, professional counselor's,  
41 clinical social worker's, or licensed marital and family therapist's license and acting within  
42 their applicable scope of coverage, in accordance with a treatment plan.
- 43 4. The treatment plan, upon request by the health benefit plan or health carrier, shall include all  
44 elements necessary for the health benefit plan or health carrier to pay claims. Such elements  
45 include, but are not limited to, a diagnosis, proposed treatment by type, frequency and  
46 duration of treatment, and goals.

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