

SB 6052 - DIGEST

(SUBSTITUTED FOR - SEE 1ST SUB)

Requires all health plans issued or renewed after December 31, 2009, to follow the evidence-based standard of care and coverage practices for treatment of morbid obesity.

Requires health carriers to develop a policy that allows a conditional waiver of contractual benefit exclusions for nonexperimental, medically necessary surgical treatment by a health care provider of morbid obesity under certain conditions.