

STATE OF NEW YORK

4211

2025-2026 Regular Sessions

IN ASSEMBLY

January 31, 2025

Introduced by M. of A. REYES, BUTTENSCHON, GLICK, SHIMSKY, LAVINE, LUNSFORD, HEVESI, SIMON, JACKSON, LUCAS, SAYEGH, ZACCARO, DE LOS SANTOS, HYNDMAN -- read once and referred to the Committee on Insurance

AN ACT to amend the social services law and the insurance law, in relation to requiring comprehensive coverage for treatment of obesity

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Subdivision 2 of section 365-a of the social services law
2 is amended by adding a new paragraph (nn) to read as follows:

3 (nn) (i) Comprehensive coverage for treatment of obesity, which shall
4 include coverage for prevention and wellness, nutrition counseling,
5 intensive behavioral therapy, bariatric surgery, and FDA-approved anti-
6 obesity medication. For purposes of this paragraph, "FDA-approved anti-
7 obesity medication" shall mean any medication approved by the federal
8 food and drug administration with an indication for chronic weight
9 management in patients with obesity.

10 (ii) Coverage criteria for FDA-approved anti-obesity medications
11 provided under this paragraph shall not be more restrictive than the
12 FDA-approved indications for such treatments.

13 (iii) Coverage under this paragraph shall be neither different nor
14 separate from coverage for any other illness, condition, or disorder for
15 purposes of determining deductibles, lifetime dollar limits, copayment
16 and coinsurance factors, and benefit year maximum for deductibles and
17 copayment and coinsurance factors.

18 (iv) Nothing shall preclude the undertaking of utilization management
19 to determine the medical necessity for treatment of obesity under this
20 paragraph, provided that all such appropriateness and medical necessity
21 determinations are made in the same manner as those determinations are
22 made for the treatment of any other illness, condition, or disorder
23 covered by such policy, contract, or plan.

EXPLANATION--Matter in italics (underscored) is new; matter in brackets
[-] is old law to be omitted.

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1 (v) The department shall provide notice to eligible persons regarding
2 the coverage required by this paragraph. The notice shall be in writing
3 and shall be prominently positioned in any literature or correspondence
4 sent to members and shall be transmitted to members within the calendar
5 year when annual information is made available to eligible persons, or
6 in any other mailing or communication to eligible persons.

7 § 2. Subsection (i) of section 3216 of the insurance law is amended by
8 adding a new paragraph 40 to read as follows:

9 (40) (A) Every policy which provides medical, major medical, or simi-
10 lar comprehensive-type coverage shall provide comprehensive coverage for
11 treatment of obesity, which shall include coverage for prevention and
12 wellness, nutrition counseling, intensive behavioral therapy, bariatric
13 surgery, and FDA-approved anti-obesity medication. For purposes of this
14 paragraph, "FDA-approved anti-obesity medication" shall mean any medica-
15 tion approved by the federal food and drug administration with an indi-
16 cation for chronic weight management in patients with obesity.

17 (B) Coverage criteria for FDA-approved anti-obesity medications
18 provided under this paragraph shall not be more restrictive than the
19 FDA-approved indications for those treatments.

20 (C) Coverage under this paragraph shall neither be different nor sepa-
21 rate from coverage for any other illness, condition, or disorder for
22 purposes of determining deductibles, lifetime dollar limits, copayment
23 and coinsurance factors, and benefit year maximum for deductibles and
24 copayment and coinsurance factors.

25 (D) Nothing shall preclude the undertaking of utilization management
26 to determine the medical necessity for treatment of obesity under this
27 paragraph, provided that all such appropriateness and medical necessity
28 determinations are made in the same manner as those determinations are
29 made for the treatment of any other illness, condition, or disorder
30 covered by such policy, contract, or plan.

31 (E) The insurer shall provide notice to covered persons regarding the
32 coverage required by this paragraph. The notice shall be in writing and
33 shall be prominently positioned in any literature or correspondence sent
34 to members and shall be transmitted to members within the calendar year
35 when annual information is made available to covered persons, or in any
36 other mailing or communication to covered persons.

37 § 3. Subsection (1) of section 3221 of the insurance law is amended by
38 adding a new paragraph 23 to read as follows:

39 (23) (A) Every insurer delivering a group or blanket policy for deliv-
40 ery in this state that provides medical, major medical, or similar
41 comprehensive-type coverage shall provide comprehensive coverage for
42 treatment of obesity, which shall include coverage for prevention and
43 wellness, nutrition counseling, intensive behavioral therapy, bariatric
44 surgery, and FDA-approved anti-obesity medication. For purposes of this
45 paragraph, "FDA-approved anti-obesity medication" shall mean any medica-
46 tion approved by the federal food and drug administration with an indi-
47 cation for chronic weight management in patients with obesity.

48 (B) Coverage criteria for FDA-approved anti-obesity medications
49 provided under this paragraph shall not be more restrictive than the
50 FDA-approved indications for those treatments.

51 (C) Coverage under this paragraph shall neither be different nor sepa-
52 rate from coverage for any other illness, condition, or disorder for
53 purposes of determining deductibles, lifetime dollar limits, copayment
54 and coinsurance factors, and benefit year maximum for deductibles and
55 copayment and coinsurance factors.

1 (D) Nothing shall preclude the undertaking of utilization management
2 to determine the medical necessity for treatment of obesity under this
3 paragraph, provided that all such appropriateness and medical necessity
4 determinations are made in the same manner as those determinations are
5 made for the treatment of any other illness, condition, or disorder
6 covered by such policy, contract, or plan.

7 (E) The insurer shall provide notice to covered persons regarding the
8 coverage required by this paragraph. The notice shall be in writing and
9 shall be prominently positioned in any literature or correspondence sent
10 to members and shall be transmitted to members within the calendar year
11 when annual information is made available to covered persons, or in any
12 other mailing or communication to covered persons.

13 § 4. Section 4303 of the insurance law is amended by adding a new
14 subsection (ww) to read as follows:

15 (ww) (1) Every policy which provides medical, major medical, or simi-
16 lar comprehensive-type coverage shall provide comprehensive coverage for
17 treatment of obesity, which shall include coverage for prevention and
18 wellness, nutrition counseling, intensive behavioral therapy, bariatric
19 surgery, and FDA-approved anti-obesity medication. For purposes of this
20 subsection, "FDA-approved anti-obesity medication" shall mean any medi-
21 cation approved by the federal food and drug administration with an
22 indication for chronic weight management in patients with obesity.

23 (2) Coverage criteria for FDA-approved anti-obesity medications
24 provided under this subsection shall not be more restrictive than the
25 FDA-approved indications for those treatments.

26 (3) Coverage under this subsection shall neither be different nor
27 separate from coverage for any other illness, condition, or disorder for
28 purposes of determining deductibles, lifetime dollar limits, copayment
29 and coinsurance factors, and benefit year maximum for deductibles and
30 copayment and coinsurance factors.

31 (4) Nothing shall preclude the undertaking of utilization management
32 to determine the medical necessity for treatment of obesity under this
33 subsection, provided that all such appropriateness and medical necessity
34 determinations are made in the same manner as those determinations are
35 made for the treatment of any other illness, condition, or disorder
36 covered by such policy, contract, or plan.

37 (5) The insurer shall provide notice to covered persons regarding the
38 coverage required by this subsection. The notice shall be in writing and
39 shall be prominently positioned in any literature or correspondence sent
40 to members and shall be transmitted to members within the calendar year
41 when annual information is made available to covered persons, or in any
42 other mailing or communication to covered persons.

43 § 5. This act shall take effect on the one hundred eightieth day after
44 it shall have become a law and shall apply to any policy issued, deliv-
45 ered, renewed, and/or modified on or after the effective date of this
46 act.