

1 State of Arkansas
2 95th General Assembly
3 Regular Session, 2025
4

As Engrossed: H2/27/25

A Bill

HOUSE BILL 1424

5 By: Representative L. Johnson
6 By: Senator B. Johnson
7

For An Act To Be Entitled

9 AN ACT TO MANDATE COVERAGE FOR SEVERE OBESITY
10 TREATMENTS; AND FOR OTHER PURPOSES.

Subtitle

14 TO MANDATE COVERAGE FOR SEVERE OBESITY
15 TREATMENTS.
16

17 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

18
19 SECTION 1. *Arkansas Code Title 20, Chapter 77, Subchapter 1, is*
20 *amended to add an additional section to read as follows:*

21 20-77-154. Treatment of severe obesity.

22 (a) The Arkansas Medicaid Program shall reimburse for the treatment of
23 diseases and conditions caused by severe obesity.

24 (b) The coverage under subsection (a) of this section shall include
25 coverage for:

26 (1) Bariatric surgery, as recognized by the American Society for
27 Metabolic and Bariatric Surgery;

28 (2) Preoperative care for bariatric surgery; and

29 (3) Post-operative care for bariatric surgery.

30 (c) This section does not require the Arkansas Medicaid Program to
31 provide coverage for injectable drugs to lower glucose levels or any other
32 drugs prescribed for weight loss.

33 (d) The Department of Human Services shall apply for any federal
34 waiver, Medicaid state plan amendments, or other authority necessary to
35 implement this section.
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1 SECTION 2. Arkansas Code Title 23, Chapter 79, is amended to add an
2 additional subchapter to read as follows:

3
4 Subchapter 29 – Coverage for Treatment for Severe Obesity

5
6 23-79-2901. Definitions.

7 As used in this subchapter:

8 (1) "Body mass index" means body weight in kilograms divided by
9 height in meters squared;

10 (2) "Covered person" means an individual who is entitled to
11 receive healthcare services under the terms of a health benefit plan;

12 (3)(A) "Health benefit plan" means an individual, blanket, or
13 group plan or a policy or contract for healthcare services offered, issued,
14 renewed, delivered, or extended in this state by a healthcare insurer.

15 (B) "Health benefit plan" includes indemnity and managed care plans.

16 (C) "Health benefit plan" does not include:

17 (i) A plan that provides only dental benefits or eye
18 and vision care benefits;

19 (ii) A disability income plan;

20 (iii) A credit insurance plan;

21 (iv) Insurance coverage issued as a supplement to
22 liability insurance;

23 (v) A medical payment under an automobile or
24 homeowners insurance plan;

25 (vi) A health benefit plan provided under Arkansas
26 Constitution, Article 5, § 32, the Workers' Compensation Law, § 11-9-101 et
27 seq., or the Public Employee Workers' Compensation Act, § 21-5-601 et seq.;

28 (vii) A plan that provides only indemnity for
29 hospital confinement;

30 (viii) An accident-only plan;

31 (ix) A specified disease plan;

32 (x) A long-term-care-only plan; or

33 (xi) Nonfederal governmental plans as defined in 29
34 U.S.C. § 1002(32), as it existed on January 1, 2025;

35 (4)(A) "Healthcare insurer" means an insurance company, hospital
36 and medical service corporation, or health maintenance organization that

1 issues or delivers health benefit plans in this state and is subject to:

2 (i) The insurance laws of this state;

3 (ii) Section 23-75-101 et seq., pertaining to
4 hospital and medical service corporations; or

5 (iii) Section 23-76-101 et seq., pertaining to
6 health maintenance organizations.

7 (B) "Healthcare insurer" does not include an entity that
8 provides only dental benefits or eye and vision care benefits;

9 (5) "Healthcare provider" means a type of provider that renders
10 healthcare services to patients for compensation including a doctor of
11 medicine or another licensed healthcare professional acting within the
12 professional's licensed scope of practice; and

13 (6) "Severe obesity" means a body mass index equal to or greater
14 than:

15 (A) Forty kilograms per meter squared (40 kg/m²); or

16 (B)(i) Thirty-five kilograms per meter squared (35 kg/m²)
17 along with an associated comorbidity.

18 (ii) An associated comorbidity under subdivision
19 (6)(B)(i) of this section includes without limitation:

20 (a) Hypertension;

21 (b) Cardiopulmonary conditions;

22 (c) Sleep apnea; or

23 (d) Diabetes.

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25 23-79-2902. Coverage for treatment of diseases and conditions caused
26 by severe obesity.

27 (a) On and after January 1, 2026, a health benefit plan that is
28 offered, issued, renewed, delivered, or extended in this state shall provide
29 coverage for medically necessary expenses for the treatment of diseases and
30 conditions caused by severe obesity.

31 (b) The coverage under subsection (a) of this section shall include
32 without limitation coverage for:

33 (1) Bariatric surgery, revision bariatric surgery, and
34 reoperative bariatric surgery as recognized by the American Society for
35 Metabolic and Bariatric Surgery;

36 (2) Preoperative care, including without limitation:

1 (A) Psychological screening and counseling;
2 (B) Behavior modification counseling;
3 (C) Nutritional and dietary counseling;
4 (D) Exercise or physical therapy evaluations, counseling,
5 and treatment; and

6 (3) Post-operative care, including without limitation:

7 (A) Post-operative follow-up;
8 (B) Behavior modification counseling;
9 (C) Nutritional and dietary counseling;
10 (D) Exercise or physical therapy evaluations, counseling,
11 and treatment; and
12 (E) Psychological screening and counseling.

13 (c) For a covered person to qualify for coverage under this section, a
14 healthcare provider shall issue a written order stating that the treatment of
15 diseases and conditions caused by severe obesity is medically necessary for
16 the covered person according to the qualifications and treatment standards
17 established by the American Society for Metabolic and Bariatric Surgery or
18 the American College of Surgeons.

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20 23-79-2903. Limitations.

21 (a) Before any treatment for diseases and conditions caused by severe
22 obesity covered under this subchapter begins, a healthcare insurer may
23 require a covered person to successfully complete a preoperative period of no
24 more than three (3) months that may include counseling, nutritional
25 education, and other covered healthcare services to assist in preparation and
26 evaluation for treatment of diseases and conditions caused by severe obesity.

27 (b) The coverage for bariatric surgery shall only be for covered
28 persons who are eighteen (18) years of age or older.

29 (c) A healthcare insurer may:

30 (1) Restrict covered healthcare services under this subchapter
31 to those provided in facilities holding accreditation by the American College
32 of Surgeons and the American Society for Metabolic and Bariatric Surgery's
33 Metabolic and Bariatric Surgery Accreditation; and

34 (2) Require that a covered healthcare service for the treatment
35 of diseases and conditions caused by severe obesity under this subchapter
36 receives prior authorization from the healthcare insurer.

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23-79-2904. Exclusions.

This subchapter does not require a healthcare insurer to provide coverage for injectable drugs used to lower glucose levels or any other drugs prescribed for weight loss.

23-79-2905. Rules.

The Insurance Commissioner, in accordance with evidence-based industry best practices, guidelines, and screening tools as recommended by the American Society for Metabolic and Bariatric Surgery or another nationally recognized body as may be designated by the commissioner, shall evaluate and promulgate rules for additional preoperative conditions that qualify as associated comorbidities and for coverage requirements, to include without limitation medically necessary expenses for:

(1) Bariatric surgery, revision bariatric surgery, and reoperative bariatric surgery, as recognized by the American Society for Metabolic and Bariatric Surgery;

(2) Preoperative care, including without limitation:

(A) Psychological screening and counseling;

(B) Behavior modification counseling;

(C) Nutritional and dietary counseling;

(D) Exercise or physical therapy evaluations, counseling, and treatment; and

(3) Post-operative care, including without limitation:

(A) Postoperative follow-up;

(B) Behavior modification counseling;

(C) Nutritional and dietary counseling;

(D) Exercise or physical therapy evaluations, counseling, and treatment; and

(E) Psychological screening and counseling.

/s/L. Johnson