

WEST VIRGINIA LEGISLATURE

2024 REGULAR SESSION

Introduced

Senate Bill 693

By Senators Grady and Phillips

[Introduced February 7, 2024; referred
to the Committee on Health and Human Resources]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new article,
 2 designated §16-67-1, §16-67-2, §16-67-3, §16-67-4, and §16-67-5, all relating to a chronic
 3 weight management task force; stating purpose of task force; setting forth task force
 4 composition; setting forth task force duties; setting forth termination date; setting forth
 5 reporting; stating Secretary of Department of Health has discretion to provide
 6 administrative support for task force; and requiring specified administrative agencies to
 7 cooperate with task force.

Be it enacted by the Legislature of West Virginia:

ARTICLE 67. WEST VIRGINIA CHRONIC WEIGHT MANAGEMENT TASK FORCE.

§16-67-1. Purpose.

1 The West Virginia Chronic Weight Management Task Force is created for the purpose of
 2 recommending and monitoring the establishment and management of programs that are found to
 3 be effective in the management of obesity.

§16-67-2. Task force composition.

- 1 (a) The Chronic Weight Management Task Force shall have the following members:
 2 (1) The State Health Officer, or his or her designee, who shall serve as chair;
 3 (2) One member of the House of Delegates appointed by the Speaker of the House of
 4 Delegates;
 5 (3) One member of the House of Delegates appointed by the Minority Leader;
 6 (4) One member of the Senate appointed by the President of the Senate;
 7 (5) One member of the Senate appointed by the Senate Minority Leader;
 8 (6) Eight members to be appointed by the Governor:
 9 (A) A representative of a national nonprofit organization whose mission is to prevent and
 10 cure diabetes and improve the lives of all people affected by diabetes;
 11 (B) A representative of a national nonprofit organization that funds cardiovascular medical
 12 research;

- 13 (C) A representative of the Office of Community Health Systems;
- 14 (D) A representative of the Office of Child Nutrition;
- 15 (E) A representative of the Association of Diabetes and Care Education Specialists;
- 16 (F) A population health or community health expert;
- 17 (G) A health care professional with expertise in the treatment of or research on the chronic
- 18 disease of obesity or a board-certified endocrinologist; and
- 19 (H) A representative of an obesity patient organization.

§16-67-3. Task force duties.

- 1 (a) The Chronic Weight Management Task Force shall;
- 2 (1) Conduct its first meeting at the call of the chair;
- 3 (A) The first meeting shall be conducted no later than May 31, 2024, and meetings shall be
- 4 conducted bi-monthly thereafter until December 31, 2026, at which time the Chronic Weight
- 5 Management Task Force terminates, unless continued by act of the Legislature.
- 6 (B) A quorum of the Chronic Weight Management Task Force is a simple majority of the
- 7 task force.
- 8 (2) Keep accurate records of the actions of the task force;
- 9 (3) Study the health implications of chronic weight management and type two diabetes;
- 10 (4) Study the various health interventions and treatments available to reduce the epidemic
- 11 and improve the health of those living with diseases in this state;
- 12 (5) Study factors to reduce the barriers to care and treatment for obesity and type two
- 13 diabetes;
- 14 (6) Study how to promote the use of data to influence decision makers to better understand
- 15 the cost savings for prevention of chronic weight management and type two diabetes;
- 16 (7) Review the health improvements of providing coverage for anti-obesity medications for
- 17 Medicaid beneficiaries;
- 18 (8) Make recommendations to the Legislature as required by this article;

- 19 (9) Provide guidance to the Legislature on:
- 20 (A) Potential statutory solutions relative to chronic weight management; and
- 21 (B) How to provide care and management related to rural health.
- 22 (b) The Chronic Weight Management Task Force may consult with entities and persons
- 23 with a particular expertise as the task force deems necessary in the fulfillment of their duties,
- 24 including the possibility of a public and private partnership.

§16-67-4. Reporting.

- 1 (a) The Chronic Weight Management Task Force shall report its findings to the Joint
- 2 Committee on Health by December 31, 2024, and annually thereafter until the task force is
- 3 terminated pursuant to the provisions of this section.
- 4 (b) The report shall include, at a minimum, the following:
- 5 (1) Conclusions and recommendations to promote a better means for chronic weight
- 6 management and prevention of type two diabetes;
- 7 (2) Recommendations for statutory and regulatory modifications;
- 8 (3) Identification of any action which may be taken by the Legislature to better foster
- 9 awareness of chronic weight management in this state; and
- 10 (4) Any other ancillary issues relative to chronic weight management.

§16-67-5. Administrative support and cooperation with state agencies.

- 1 (a) The Secretary of the Department of Health, at his or her discretion, may provide the
- 2 Chronic Weight Management Task Force with administrative support reasonably necessary for the
- 3 task force to carry out its duties. In addition, the Secretary of the Department of Health may make
- 4 and sign any agreements and may do and perform any acts that are necessary to receive, accept,
- 5 or secure gifts, grants, and bequests of funds in the name of the task force.
- 6 (b) The Department of Health, the West Virginia Insurance Commission, the Health Care
- 7 Authority, the Public Employees Insurance Agency and any other entity of state government shall

- 8 cooperate with the Chronic Weight Management Task Force in the exchange of data, information,
- 9 and expertise if so, requested by the task force.

NOTE: The purpose of this bill is to create a Chronic Weight Management Task Force to study obesity and make report of its findings to the Joint Committee on Health. The bill sets forth the members of the task force and provides for administrative support by the Department of Health at the discretion of the Secretary. The bill requires other state agencies to cooperate with the task force.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.