

WEST VIRGINIA LEGISLATURE

2024 REGULAR SESSION

Introduced

Senate Bill 743

By Senators Takubo and Deeds

[Introduced February 9, 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 section,
 2 designated, §9-5-34, relating to West Virginia Bureau for Medical Services' medically
 3 supervised weight loss program; defining terms; setting forth eligibility criteria; setting forth
 4 approval process; requiring regular assessments of the program focused on spending and
 5 health outcomes; and requiring reporting to the Legislature.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

§9-5-34. Medically supervised weight loss program.

1 (a) Definitions. — As used in this section, unless the context otherwise requires:

2 "Anti-obesity medication" means a class of FDA-approved medication used to treat
 3 obesity.

4 "Body mass index" or "BMI" means a person's weight in kilograms divided by the square of
 5 height in meters.

6 "Bureau" means the Bureau for Medical Services.

7 "Recipient" means a person who applies for and receives assistance under the Medicaid
 8 Program.

9 (b) Anti-obesity medication eligibility. —

10 (1) The recipient shall have a BMI of at least 35 kg/m2 or BMI of at least 30 kg/m2 and one
 11 of the following conditions related to obesity:

12 (2) Hypertension;

13 (3) Metabolic-associated fatty liver disease;

14 (4) Obstructive sleep apnea;

15 (5) Coronary heart disease; or

16 (6) Type 2 diabetes.

17 (c) Approval process. —

18 (1) A recipient seeking approval of an anti-obesity medication shall:

19 (2) Enroll in and actively participate in a behavior modification program approved by the

20 Bureau for Medical Services;

21 (3) Achieve a minimum weight loss of five percent of baseline bodyweight by the end of the
22 seventh month to continue anti-obesity therapy.

23 (d) The Bureau for Medical Services shall conduct regular assessments, but not less than
24 quarterly, of spending associated with the program and health outcomes associated with the
25 program.

26 (1) The Bureau for Medical Services shall collect and analyze data associated with the
27 recipients enrolled in this program, including but not limited to their health status before beginning
28 the anti-obesity medical and throughout the course of treatment.

29 (2) The Bureau of Medical Services shall submit report to the Legislative Oversight
30 Commission on Health and Human Resources Accountability on December 1, 2025, and annually
31 thereafter regarding the health outcomes associated with the program.

NOTE: The purpose of this bill is to set forth criteria for the Bureau for Medical Services to follow regarding anti-obesity medications and to require reporting of outcomes.

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