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## **OLR Bill Analysis**

### **sSB 977**

#### ***AN ACT CONCERNING MEDICAL ASSISTANCE FOR SURGERY AND MEDICAL SERVICES RELATED TO TREATMENT OF OBESITY.***

#### **SUMMARY**

This bill requires the Department of Social Services (DSS) commissioner to cover bariatric surgery and specified medical services for Medicaid and HUSKY B beneficiaries with obesity under certain circumstances. Under the bill, these medical services include (1) FDA-approved prescription drugs for outpatient treatment of obesity and (2) nutritional counseling from a registered dietitian-nutritionist. Bariatric surgery is a procedure that makes changes to the digestive system to help a patient with obesity lose weight.

Specifically, as long as beneficiaries otherwise meet conditions set by the federal Centers for Medicare and Medicaid Services, the bill requires DSS to cover the following:

1. medical services for beneficiaries with a body mass index (BMI) over 35, and
2. bariatric surgery and related medical services for beneficiaries with severe obesity.

Under the bill, a person has severe obesity if he or she has a BMI of (1) at least 35 with a comorbid disease or condition (e.g., a cardiopulmonary condition, diabetes, hypertension, or sleep apnea) or (2) over 40. A person has obesity if he or she has a BMI of 30 or higher. BMI is calculated by dividing a person's weight in kilograms by height in meters squared.

The bill allows the DSS commissioner to amend the state plans for Medicaid and the Children's Health Insurance Program (i.e., HUSKY B)

if needed to implement the bill's provisions.

Under current regulations, DSS covers surgical services needed to treat morbid obesity that causes or aggravates another medical illness (Conn. Agencies Regs., § 17b-262-341(9)).

EFFECTIVE DATE: July 1, 2023

**COMMITTEE ACTION**

Human Services Committee

Joint Favorable Substitute Change of Reference - APP  
Yea 20 Nay 2 (03/02/2023)

Appropriations Committee

Joint Favorable  
Yea 44 Nay 5 (04/21/2023)