## VETOES

(ii) equal to or greater than 35 kilograms per meter squared with a comorbid medical condition, including hypertension, a cardiopulmonary condition, sleep apnea, or diabetes.

## (b) This section applies to:

- (1) insurers and nonprofit health service plans that provide hospital, medical, or surgical benefits to individuals or groups on an expense-incurred basis under health insurance policies or contracts that are issued or delivered in the State;
- (2) health maintenance organizations that provide hospital, medical, or surgical benefits to individuals or groups under contracts that are issued or delivered in the State; and
- (3) managed care organizations, as defined in § 15-101 of the Health General Article.
- (c) An entity subject to this section shall provide coverage for the <u>SURGICAL</u> treatment of morbid obesity <del>through gastric bypass surgery or another surgical method</del> that is:
- (1) recognized by the National Institutes of Health as effective for the long-term reversal of morbid obesity **!**; and
- (2) consistent with eriteria <u>GUIDELINES</u> approved by the National Institutes of Health-1.
- (d) An entity subject to this section shall provide the benefits required under this section to the same extent as for other medically necessary surgical procedures under the enrollee's or insured's contract or policy with the entity.
- (E) AN ENTITY SUBJECT TO THIS SECTION MAY REQUIRE AN ENROLLEE OR INSURED TO SATISFY THE DEFINITION OF MORBID OBESITY AND OTHER GUIDELINES RECOGNIZED BY THE NATIONAL INSTITUTES OF HEALTH TO QUALIFY FOR COVERAGE FOR THIS BENEFIT:

## SECTION 2. AND BE IT FURTHER ENACTED, That:

- (a) There is a Task Force to Study Utilization Review of the Surgical Treatment of Morbid Obesity.
  - (b) The Task Force consists of the following members:
- (1) two representatives of the Maryland Hospital Association, appointed by the Maryland Hospital Association;
- (2) <u>four members appointed by the Maryland Insurance Administration,</u> as follows:
- (i) two representatives of health maintenance organizations in the State;
- (ii) one representative of a nonprofit health service plan in the State; and