



Coverage for Weight Management and Physical Activity in Cancer Care

Roundtable on Obesity Solutions

*The Challenge of Treating Obesity and Overweight:
Learning what works and making it happen*

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Don Bradley, MD, MHS-CL



Duke Health



ACA mandate for obesity coverage:

USPSTF Grade A or B recommendations

Summary of Recommendation and Evidence

Population	Recommendation	Grade (What's This?)
All Adults	The USPSTF recommends screening all adults for obesity. Clinicians should offer or refer patients with a body mass index (BMI) of 30 kg/m ² or higher to intensive, multicomponent behavioral interventions.	B
Children aged 6 years and older	The USPSTF recommends that clinicians screen children aged 6 years and older for obesity and offer them or refer them to comprehensive, intensive behavioral intervention to promote improvement in weight status.	B

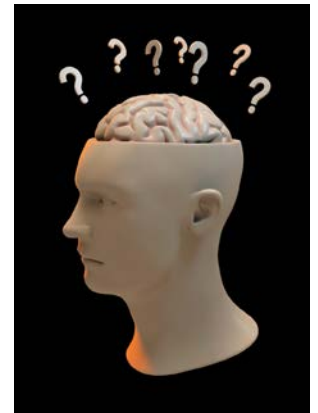
<https://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/obesity-in-adults-screening-and-management>

<https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/obesity-in-children-and-adolescents-screening>



Inside the mind of a payer: 10 key determinants of coverage

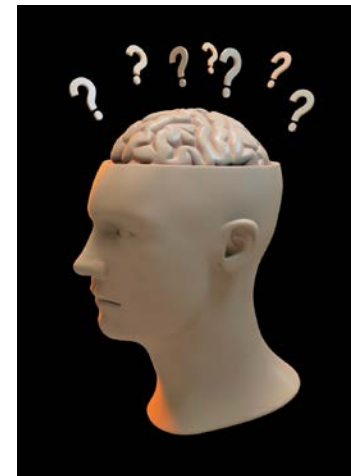
1. Customer demand/preference for a benefit/service
2. Cost
 - as low as possible
 - predictable
3. Evidence for effectiveness and efficiency
4. Deliverable quality outcomes (especially CMS and NCQA metrics)
5. Network for delivery





Inside the mind of a payer: 10 key determinants of coverage

6. Customer satisfaction/experience
7. Ease of administration
8. Compliance/Mandates/Essential Health Benefits
9. Risk
 - legal
 - financial
 - regulatory
 - public relations
 - network
10. Profitability/margin



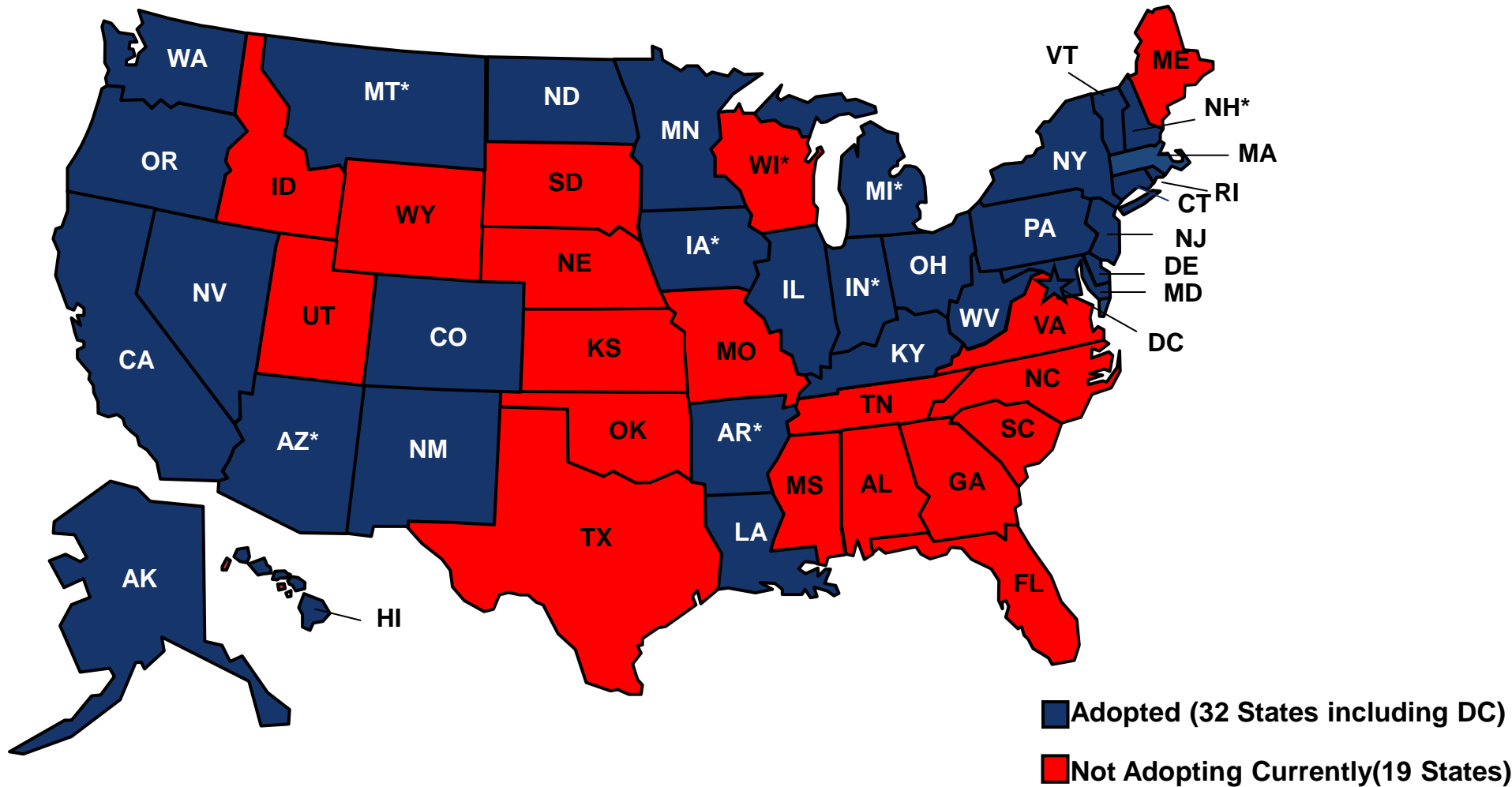


Medicaid coverage for obesity services

- The coverage slides are STOP Obesity Alliance analyses, and not endorsed or generated by CMS.
- The coverage data are from 2014.
- Essential Benefits requirements from the ACA apply to Medicaid expansion as well. The coverage maps probably look more “orange” [partial coverage] after 2014.



Current Status of State Medicaid Expansion Decisions [01/2017]



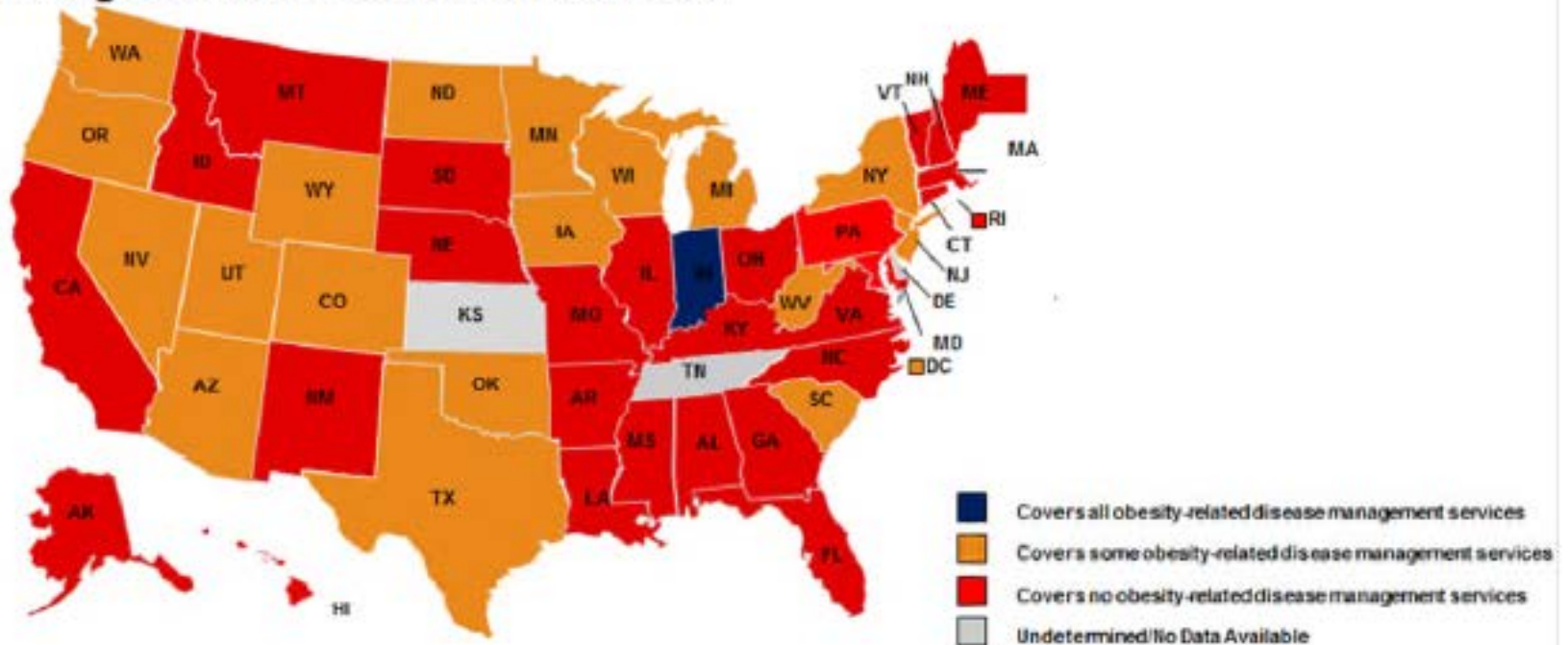
NOTES: Current status for each state is based on KCMU tracking and analysis of state executive activity. *AR, AZ, IA, IN, MI, MT, and NH have approved Section 1115 waivers. WI covers adults up to 100% FPL in Medicaid, but did not adopt the ACA expansion.

SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated January 1, 2017.

<http://kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act/>



Map 3: Medicaid Coverage of Obesity-Related Disease Management and Education Services

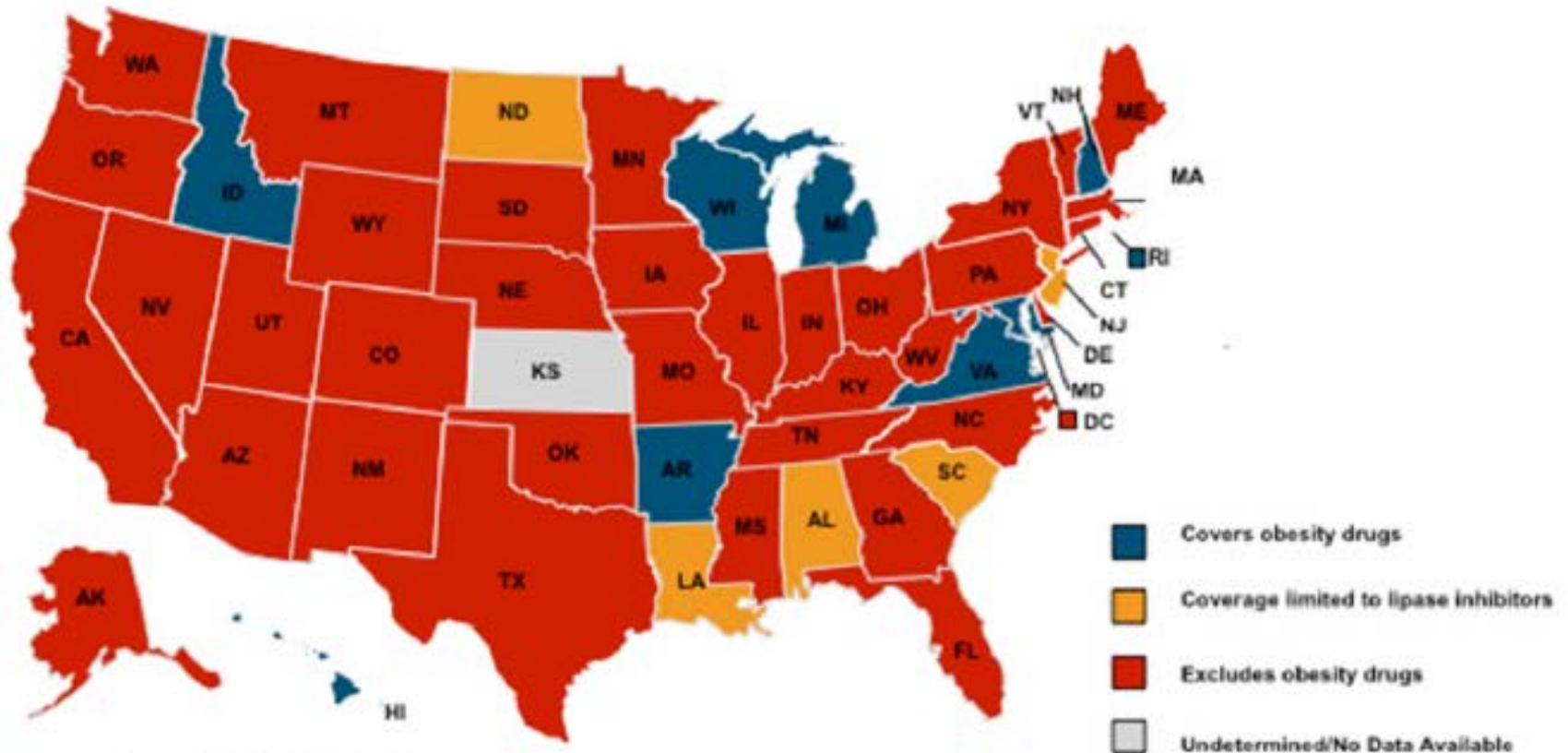


Source: Provider Manuals and CPT Code Search of Provider Fee Schedules
Note: Common Disease Management Services are defined as CPT codes 99078, S0315-S0316, S9445-S9446, and 98960-98962

<http://stopobesityalliance.org/wp-content/themes/stopobesityalliance/pdfs/Medicaid%20FFS%20Treatment%20of%20Obesity%20Interventions%202014.pdf>, accessed 04/04/2017



Map 5: Medicaid Coverage of Obesity Drugs

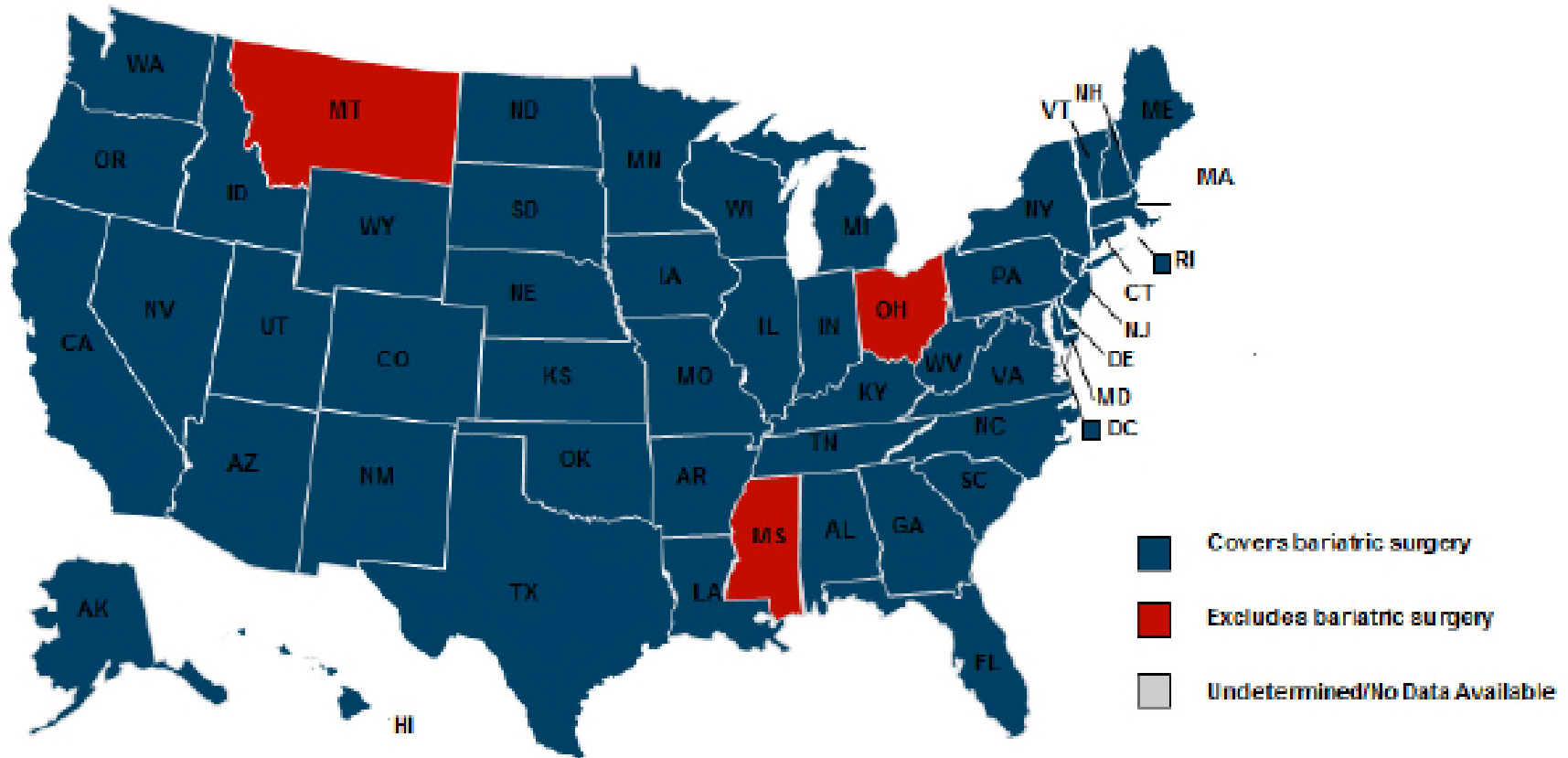


Source: State Provider Manuals

<http://stopobesityalliance.org/wp-content/themes/stopobesityalliance/pdfs/Medicaid%20FFS%20Treatment%20of%20Obesity%20Interventions%202014.pdf>, accessed 04/04/2017



Map 6: Medicaid Coverage of Bariatric Surgery



Source: State Provider Manuals

<http://stopobesityalliance.org/wp-content/themes/stopobesityalliance/pdfs/Medicaid%20FFS%20Treatment%20of%20Obesity%20Interventions%202014.pdf>, accessed 04/04/2017