STOP Obesity Alliance Task Force Urges HHS Secretary to Give Equal Weight to Obesity and Related Diseases When Determining the Essential Health Benefits Package

Federal, evidence-based recommendations underpin Alliance Task Force’s proposal to include obesity services in the essential health benefits package

WASHINGTON, D.C., August 30, 2011 – The Strategies to Overcome and Prevent (STOP) Obesity Alliance Essential Health Benefits Task Force today released recommendations supporting the inclusion of obesity-related services in the U.S. Department of Health and Human Services’ essential health benefits (EHB) package. The EHB package will outline a minimum standard of coverage required by all health plans offered through health insurance exchanges established under the Affordable Care Act (ACA) by 2014.

“A major intent of the ACA is to control health care spending and increase access to necessary services for those who need it most,” said Alliance Director Christine Ferguson, J.D. “With America’s rising obesity rates leading to worsening health outcomes and equally alarming cost projections, leaving obesity unaddressed is both unsustainable and unacceptable.”

At the core of the Task Force’s recommendations is the tenet that obesity and weight-related interventions should receive the same consideration as any other health condition. The Task Force noted that while more research is needed, there are evidence-based obesity and obesity-related chronic disease prevention, treatment and management services available that could and should be covered as a way to stem the obesity epidemic.

Specifically, the recommendations propose that:

- No obesity prevention, treatment or management services should be summarily excluded from the new essential health benefits package coverage requirements under the ACA;
- All evidence-based preventive services be covered;
- All preventive benefits be covered with no or reduced cost-sharing; and
- All evidence-based treatments for obesity be covered with reasonable cost-sharing.

Federal, evidence-based recommendations underpin the Task Force’s proposal to include obesity services in the EHB. The Task Force cites recommendations from the U.S. Preventive Services Task Force and the National Heart, Lung, and Blood Institute as part of the evidence base for including these services.

Obesity affects one-third of U.S. adults and is linked to increasing the risk of more than 20 chronic diseases and health conditions, including diabetes, that cause devastating consequences and increased mortality. “Including obesity-related services as part of the EHB has potential to improve the health of millions of Americans,” said Ferguson, “especially those that are currently medically underserved and suffering from the greatest weight-related disease burden.”
The Alliance EHB Task Force members include the American Medical Group Association, Black Women’s Health Imperative, Canyon Ranch Institute, Care Continuum Alliance, COSHAR Foundation, Obesity Action Coalition, OWL-The Voice of Midlife and Older Women, Reality Coalition, Red Hot Mamas, Service Employees International Union, The Obesity Society and Trust for America’s Health.

About the STOP Obesity Alliance
The Strategies to Overcome and Prevent (STOP) Obesity Alliance is a collaboration of consumer, provider, government, labor, business, health insurers and quality-of-care organizations united to drive innovative and practical strategies that combat obesity. The Alliance receives funding from founding sponsor, Sanofi, and supporting sponsor, Allergan, Inc. For more information, visit www.stopobesityalliance.org.

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