

## 2021 Interim Study Proposals to Address Obesity

The rising expense of obesity in Texas, exacerbated by the COVID-19 pandemic, is unsustainable — we cannot afford inaction. The Partnership for a Healthy Texas develops and promotes policies, and supports evidence-based programs, that prevent and address obesity and improve the health of Texas communities.

The prevalence of obesity in Texas was high before the COVID-19 pandemic at over 34.8 percent in 2018 and the pandemic created an opportunity for increases due to changes in physical activity and increased food insecurity. At the same time, the crisis of the COVID-19 pandemic highlighted both the importance of a strong public health infrastructure and the heightened vulnerability of those living with obesity. As children return to school and families return to work, the Partnership for a Healthy Texas believes there is an opportunity to address the obesity crisis in our state.

Obesity is chronic disease that is associated with increased disability, related chronic diseases, and death and has substantial economic and social costs. Cost-effective solutions that address access to healthy and affordable food, opportunities for physical activity, and treatment of this disease are needed now more than ever. To improve the health of our state, now is the time to connect Texans with policies that lead to such solutions in their schools and communities.

Texas legislators can lead the nation in passing policies aimed at supporting a healthy environment and ensuring access to evidence-based treatment solutions for Texans. The Partnership believes the Texas legislature should continue to strive to ensure the viability of Texas' future workforce and create a healthy environment for Texans.

## **House Human Services and Senate Health and Human Services Committees:**

➤ Identify opportunities for Medicaid managed care organizations, health care providers, and communities to partner to develop and implement non-medical initiatives that address social determinants of health (SDoH) to help patients be healthier and more productive at home, school, and work, while also containing Medicaid costs.

Rationale: Social determinants of health (SDoH) such as access to nutritious food, transportation, and adequate housing have a direct impact on health outcomes. Research shows up to 80 percent of a person's overall health is driven by social and environmental factors. Providers and managed care organizations (MCOs) addressing these SDoH are essential to improve overall health care outcomes and reduce costs. There are more than 4 million Texans who receive health care through the Medicaid program, almost all of whom are enrolled in a managed care organization. For Texas to make significant strides toward improving health care

outcomes, including reducing obesity, it must address all the factors that contribute to people's health.

## **House Public Education and Senate Education Committees**

> Study and assess the impact of the COVID-19 pandemic on physical activity, physical education, dietary intake, and obesity for Texas children. Examine how school meals, physical education classes, and other opportunities for physical activity were impacted by the COVID-19 pandemic and virtual schooling.

Rationale: The COVID-19 pandemic and transitions to virtual learning options impacted all aspects of student's lives. In addition to effecting academic outcomes, the transition impacted access to healthy school meals and physical activity for students. With homes becoming schools, lack of access to play and exercise also became apparent. As a result, these disruptions caused youth to report decreased physical activity, increased sedentary behavior, and consumption of unhealthy foods and sugar sweetened beverages – all of which increase risk for weight gain. Data from the Texas School Physical Activity and Nutrition (Texas SPAN) survey, conducted in 2019-2020 prior to the pandemic, found that the prevalence of obesity among children in grades 2, 4, 8, and 11 in Texas was well above the U.S. prevalence, and ranged from 22.3% among 2<sup>nd</sup> grade students to 28.5% among 4<sup>th</sup> grade students. As students return to the classroom, it is imperative that all the deficits created during the pandemic are addressed to ensure students have a healthy and productive future.

## **House Insurance and Senate Health and Human Services Committees**

Identify and study the availability of obesity treatment, management, and care options not yet covered by Medicaid or the state-employee health insurance plans with a cost-neutral or cost-positive framework for the state.

Rationale: According to the Robert Wood Johnson Foundation, more than a third of Texas adults have obesity, ranking 19<sup>th</sup> highest in the nation. Those with lower incomes are more likely to face higher rates of obesity. Obesity is a chronic disease. Evidence-based treatment options exist but are not available through most healthcare coverage options in Texas because of outdated views of obesity as a lifestyle choice rather than a disease. By not making use of these treatment options, the risk of additional chronic diseases and overall mortality increases. During the COVID-19 pandemic we have witnessed the significant consequences to health and life with the underlying disease of obesity. Coverage for obesity treatment and management have the potential to save the Texas Medicaid and state employee insurance programs funds and ensure adults can be active participants in the economy.

\*Consider as a joint interim charge with the House Appropriations and Senate Finance Committees

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