
HOUSE CONCURRENT RESOLUTION

URGING THE FORMATION OF A TASK FORCE TO DEVELOP RECOMMENDATIONS FOR IMPROVING THE PROVISION OF OBESITY PREVENTION-RELATED SERVICES AND COUNSELING IN ACCORDANCE WITH THE IMPLEMENTATION OF THE PATIENT PROTECTION AND AFFORDABLE CARE ACT.

1 WHEREAS, obesity is a major health and economic concern for
2 Hawaii and the nation, causing higher medical costs and lower
3 quality of life; and

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5 WHEREAS, in Hawaii adult obesity has more than doubled
6 between 1995 and 2009 and childhood obesity increased by 38%
7 from 1999 and 2009; and

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9 WHEREAS, in Hawaii one in three children entering
10 kindergarten is overweight or obese and one in two adults is
11 overweight or obese; and

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13 WHEREAS obesity-related medical expenditures in Hawaii were
14 calculated to be over \$470 million in 2009, and are continuing
15 to rise; and

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17 WHEREAS, obesity is a complex and multifaceted issue
18 requiring the collaboration of stakeholders in government, non-
19 profit, private and health care sectors to create systematic
20 large-scale environmental changes; and

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22 WHEREAS, stakeholders must be educated about the provisions
23 of the Affordable Care Act and of the ongoing efforts of the
24 Hawaii Healthcare Project and how these changes affect Hawaii's
25 health care system; and

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27 WHEREAS, the passage of the Affordable Care Act provides an
28 opportunity to assess gaps in healthcare providers' ability to
29 prevent and treat obesity in Hawaii; and

1 WHEREAS the payment structure for health care providers
2 offering services and counseling related to obesity prevention
3 and treatment must be improved; and
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5 WHEREAS, health care providers must be educated about
6 reimbursable medical costs related to obesity prevention and
7 treatment under the new ACA guidelines so that they may be
8 compensated for the provision of these services; and
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10 WHEREAS, health care providers must be encouraged to
11 provide services and counseling to overweight and obese
12 patients; now, therefore,
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14 BE IT RESOLVED that government, non-profit, and private
15 health care organizations collaborate to increase the provision
16 of obesity-related services and counseling by health care
17 providers as mandated under the new Affordable Care Act
18 guidelines; and
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20 BE IT FURTHER RESOLVED that the Department of Health is
21 requested to establish the Obesity Prevention Healthcare
22 Reimbursement Task Force tasked with:
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- 24 (1) Assessing gaps in health care providers' ability to
25 prevent and provide treatment for obesity-related
26 services and counseling;
- 27 (2) Investigating providers' reimbursement options for the
28 provision of these services;
- 29 (3) Educating providers about these reimbursement options;
30 and
- 31 (4) Encouraging providers' utilization of reimbursement
32 options; and
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34 BE IT FURTHER RESOLVED that the director of health will
35 appoint up to twenty five task force members having demonstrated
36 interest in and having backgrounds beneficial to assisting the
37 function of the task force, including members having extensive
38 knowledge, expertise, or experience in such areas as obesity
39 prevention, healthcare, the affordable care act, healthcare
40 coding, nutrition and physical activity, and related areas; and
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42 BE IT FURTHER RESOLVED that the task force is requested to
43 research how other states are implementing obesity prevention
44 reimbursement practices; and

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BE IT FURTHER RESOLVED that the task force is requested to develop recommendations for increasing the provision of obesity-related services and counseling by health care providers through additional International Classification of Diseases, ninth edition and tenth edition codes, training and education, or other strategies; and

BE IT FURTHER RESOLVED that the task force is requested to submit a report of its findings and recommendations, including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the regular session of 2014; and

BE IT FURTHER RESOLVED that the members of the task force serve without compensation and receive no reimbursement for expenses; and

BE IT FURTHER RESOLVED that the Department of Health is requested to assist the task force by providing a facilitator; and

BE IT FURTHER RESOLVED that the task force cease to exist on June 30, 2014; and

BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the Governor, the Director of Health, Director of Human Services, and the Director of Commerce and Consumer Affairs.

OFFERED BY:  BY REQUEST

JAN 22 2013

JUSTIFICATION SHEET

DEPARTMENT: Health

TITLE: URGING THE FORMATION OF A TASK FORCE TO DEVELOP RECOMMENDATIONS FOR IMPROVING THE PROVISION OF OBESITY PREVENTION-RELATED SERVICES AND COUNSELING IN ACCORDANCE WITH THE IMPLEMENTATION OF THE PATIENT PROTECTION AND AFFORDABLE CARE ACT.

PURPOSE: This concurrent resolution is based on a recommendation from the Childhood Obesity Prevention Task Force.

MEANS: Adoption of the proposed concurrent resolution.

JUSTIFICATION: Changes in health insurance regulation by the Patient Protection and Affordable Care Act should address the current lack of reimbursement by private plans for obesity prevention care, and place an emphasis on prevention and wellness rather than disease management. It is likely that better treatment and improved outcomes would be realized if obesity prevention treatments were more widely accessible and less costly for the consumer.

Impact on the public: Potential improved access to clinical services for obesity prevention.

Impact on the department and other agencies: None.

OTHER FUNDS: None.

PPBS PROGRAM DESIGNATION: HTH 495.

OTHER AFFECTED AGENCIES: None.

EFFECTIVE DATE: Upon approval.