Implementing MO Childhood Obesity Recommendations
MOCAN Update July 2018
MO Children’s Service Commission (CSC) Establishes Childhood Obesity Subcommittee

- Invited broad group of stakeholders
  - State agencies (education, health, MHD), academic healthcare institutions, MO AAP, lead child care agency, funders
- Secured facilitator and report writer
  - Small grants from:
    - Health Care Foundation of Greater Kansas City
    - Missouri Foundation for Health
- Convened Subcommittee monthly in 2014
- Drafted recommendations
- Conducted 4 public forums for community input
- Published report (2015)
Critical to the Health of Our Children: Missouri’s Actions for Addressing Childhood Obesity

- **December 2014**: Revised and presented to CSC
- **April 2015**: Presented at statewide conference
- Compiled publication with recommendations and rationale

http://extension.missouri.edu/mocan/childhoodobesity/

Subcommittee on Childhood Obesity
State of Missouri Children’s Services Commission
Obesity in Childhood Tracks into Adulthood

Adult Obesity Rate by State, 2016

Target our Resources to Areas of High Disease Prevalence

Midwest has the highest prevalence of adult metabolic syndrome, obesity, and diabetes

- Targeting of prevention and treatment for children with obesity could decrease future health risks and associated costs
- Institute of Medicine has suggested targeting of resources to geographical locations with high prevalence
Updates on Implementation of Recommendations

Focus Areas for Priority Actions

- Child Care
- Child Health & Wellness Commission Aligns Actions
- Community
- Schools
- Treatment
Treatment Recommendation

Reimburse licensed professionals with specialized training in family-centered, evidence-based, multi-component weight reduction programs through all Medicaid plans. Reimburse services provided in health care or community settings for children who have overweight or obesity.

**Focus Areas for Priority Actions**

- Child Care
- Community
- Child Health & Wellness Commission
- Schools
- Treatment
MoHealthNet Division (MHD)
Conducted fiscal analysis to expand coverage for obesity treatment

Financial Impacts

- Each Medicaid beneficiary with obesity on average costs $1,021 more than normal weight beneficiaries (Finkelstein EA, Trogdon JG, Cohen JW, Dietz W. Annual medical spending attributable to obesity: Payer-and service-specific estimates. Health Affairs. September/October 2009;28(5):w822-w831. doi: 10.1377/hlthaff.28.5.w822.)

- Pediatric: Missouri will expend $12 billion annually on obesity-related health care costs by 2030 (CSC Childhood Obesity Task Force Report, 2014)
MHD Process

- MHD convened subject matter experts work group to provide input to the process
- Work group included individuals from pediatric hospitals and academic centers
- Consensus process for building evidence-based program

Modeling Process
- Identify Services
- Identify Population
- Identify Provider Requirements
- Identify Codes
- Identify Costs/Projected Savings
Services, Population, and Coding

- **Services**
  - Intensive Behavioral Therapy
  - Mix of individual, family, and group sessions
  - Frequency in current modeling (USPSTF recommendations as base)
    - Minimum 12 hours for adults (following Medicare program)
    - Minimum 26 hours for children
  - Opportunity to continue for additional 6 months if benchmarks met

- **Population**
  - Adults
    - BMI 30 or greater
  - Children
    - Ages 5-18
    - Age and gender-specific BMI greater than or equal to 95th%

- **Coding**
  - In initial modeling, have identified a starter set of codes
  - Additional discussion pending as model continues in development
Preparing the workforce
Pilot grant to build capacity 2017-2019

- Convene a healthcare advisory group
- Develop MO-specific best practices for treatment training for key healthcare professional stakeholders
  - Medical Providers
  - RDs
  - Behavioral Health Providers
- Modify training after pilot
- Create sustainability plan to reach more providers
Medical provider training status

- 3 trainings held, 49 medical providers
- Have videotaped training for which medical providers can receive CME
- Future plans made for presenting
  - MO AAP conference in Columbia on September 14, 2018
  - Clinical Advances in Pediatrics in KC on September 26, 2018
Dietitian training status

- Existing AND-CDR Certifications
- MOAND membership needs assessment conducted
- MOAND partnership for recruitment
- Curriculum/Resources developed
- 2 trainings with ~50 RDs
- In-person and videotaped training
FBT Provider training status

- Providers eligible to be reimbursed by MO HealthNet: Licensed psychologists, professional counselors, clinical social workers
- Need for Certification Process
- Plans for Curriculum/Resources
- Longer in-person training and follow-up supervision
- Recruitment through state professional associations, local provider groups
- Initial trainings planned for September and December
School Recommendation

Establish (capacity at Mo Department of Elementary and Secondary Education) to maintain up-to-date standards for health and physical education curricula. Modify school accreditation by creating and maintaining a health and wellness component. Train and support school staff to implement best practices and school wellness policies related to nutrition, physical activity, physical education and family engagement.
Schools Update

- DESE submitted proposal for funding 2016
- Funding awarded 2016 (MFH & HCF-GKC) (3 years)
- Director position created and hired 2017
- Laura Beckmann assumed this position in 2017
- Advisory group convened
- Strategic plan was developed and reviewed by advisory council for implementation
Schools Update

CDC cooperative agreement grant awarded 2018 (5 years)

- Improving Student Health and Academic Achievement through Nutrition, Physical Activity and the Management of Chronic Conditions in Schools (only 17 states awarded)
- Strategies and activities are focused within the context of the Whole School, Whole Community, Whole Child (WSCC) model.
- Promotes the development and implementation of policies and practices for three strategy areas as they relate to school nutrition, physical activity, school wellness, and management of chronic disease among students: infrastructure, professional development/training and technical assistance.
- A comprehensive statewide approach prioritizing work within 7 school districts
- Creates a Missouri Healthy Schools (MHS) position
- Establishes a DESE MHS Leadership Council
Healthy Schools, Success-Ready Students

Evidence shows that the health of students is strongly linked to their success in school. Healthy students are better on all levels of academic achievement — academic performance (class grades, standardized test, graduation rates), educational behavior (attendance, dropout rates, and behavioral problems in school), and cognitive skills and attitudes (concentration, memory, and mood). The healthy development of children and adolescents is influenced by many societal institutions. Students spend much of their time at school, making it an ideal setting to teach and model healthy behaviors. School health programs and policies have been shown to be one of the most effective means to prevent or reduce risk behaviors and prevent serious health problems among students. Schools can reduce how often students are absent, experience behavioral problems, and achieve higher school-wide test scores and grades by implementing strategies to help students stay healthy. School health has four interrelated goals shown below:

- Improve health knowledge, attitudes, and skills
- Improve health behaviors and health outcomes
- Improve educational outcomes
- Improve social outcomes

These goals are most effectively and efficiently achieved when all the goals are addressed simultaneously through a coordinated approach requiring action from the entire community — state public health agencies, school districts, parents, and students. Evidence-based strategies, tools, and resources to promote healthy and active behaviors in young people and to create a healthy school environment can be found on the CDC Healthy Schools website. By all stakeholders working together, we can ensure that our youth are healthy and ready to learn.

Resources

- Health and Academics (CDC)
- Healthy Students Are Better Learners (CDC/DASH)
- Brain Rules — Dr. John Medina
- Spark — John Ratey, M.D.
Commission Recommendation

Establish a **Commission on Child Health and Wellness**, supported by the Mo Department of Health and Senior Services, to oversee implementation of the subcommittee’s recommended actions, study effectiveness of obesity prevention strategies, and provide an ongoing forum for education and future actions. The commission will include delegates from state agencies and others representing health care professionals, scientists, community-based prevention specialists and families.
Commission’s Mission

Why should this group exist?

- Obesity is a complex medical, social, economic, and environmental problem.
- We need an effective means to foster collaboration on implementation of priority recommendations to address the changing needs of children and families in Missouri.
- Strengthen and align services and policy to support and evaluate efforts.
- Working across sectors fosters innovative solutions.
Steering Committee Convened 2017 to Create Viable Structure

- Review the options
- Analyze and pick best option
- Flesh out details, e.g., guiding principles, functions, mission-vision
Mo Council for Activity and Nutrition (MOCAN) Assuming Commission Functions

- Best option in Missouri at this time. Builds on mature coalition with ten year history.
- Expanding supports and capacity. New full-time coordinator starting July 30th.
- Formally evaluating MOCAN members’ collaboration (Wilder Inventory Factor Tool) to inform planning (Summer-Fall 2018).
- Fleshing out plans to fulfill commission functions and mobilize MOCAN members (Ongoing).
Lets get the messages out...

Where

Nationally:  CDC Webinar May 16, 2018-Missouri’s story
Regionally:  HRSA Region VII Conference, June 28, 2018
State:
- MOCAN webinars (March 16, 2018) and presentations (July 19, 2018)
- MOCAN website
- MoAAP online updates (Pedslines, March 2018)
- Others???
Locally
- KC Medical provider training pilot
- KC dietitian training pilot
- KC behavioral interventionists training pilot
- Social Media/website references
- Others?
Next Steps....

- Use common messages...social media, newsletters, etc.
- Promote health care training opportunities
- Inform plan for statewide training sustainability—for both prevention and treatment
- Support actions to advance school wellness and health policy and practices
- Support actions to advance child care wellness and health policies and practices
- Inform MOCAN collaborative approaches
- Identify where your organization’s assets can be used to address our collective needs and priorities
For more information

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Thanks to our Financial Supporters

- The Health Care Foundation of Greater Kansas City and Missouri Foundation for Health provided funds for work of the Subcommittee for Childhood Obesity—report writing, research, meeting facilitation and public forums (2014-2015).

- Children’s Mercy, Washington University in St. Louis, University of Missouri-Columbia, and Child Care Aware® of Missouri provided in-kind supports for work of Subcommittee and subsequent proposal writing and subsequent work (2013 through present).

- The Health Care Foundation of Greater Kansas City has provided funds for treatment training pilot and start of Commission (2017-19).

- The Health Care Foundation of Greater Kansas City and Missouri Foundation for Health have provided funds for school support (2017-2019).