

# Insurance coverage for adult obesity care increasing

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nutritional counseling (from 24 to 42 states), 64 percent for pharmacotherapy (from 14 to 23 states), and 23 percent for bariatric surgery (from 35 to 43 states). For Medicaid programs, the proportion indicating coverage increased by 133 percent for nutritional counseling (from 9 to 21 states) and 9 percent for bariatric surgery (from 45 to 49 states), but there was no increase for pharmacotherapy (16 [states](#) in both plan years).

"Where coverage has expanded, educating providers and beneficiaries on the availability and proper use of evidence-based [obesity](#) treatments may improve health outcomes," the [authors](#) write.

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(HealthDay)—Coverage for adult obesity care improved substantially in Medicaid and state employee insurance programs between 2009 and 2017, according to a study published online Nov. 14 in *Obesity* to coincide with the annual meeting of The Obesity Society (ObesityWeek), held from Nov. 11 to 15 in Nashville, Tennessee.

Nichole Jannah, from George Washington University in Washington, D.C., and colleagues examined changes in [coverage](#) for adult obesity treatment services in Medicaid and state employee health insurance programs between 2009 and 2017 for all 50 states and the District of Columbia. The authors focused on indications of coverage and payment policies specific to evidence-based treatment modalities for adults (>21 years of age) with obesity, including nutritional counseling, pharmacotherapy, and bariatric surgery.

The researchers found that during the study period, the proportion of state employee programs indicating coverage increased by 75 percent for

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