



Obesity Care Continuum Supports Preventive Health Savings Act

The Obesity Care Continuum (OCC) urges members of Congress to support the Preventive Health Savings Act (HR 2663/S 1422) introduced by Representatives Burgess and Christensen and Senators Cardin and Crapo, respectively. The OCC applauds these legislators for introducing this critical legislation, which would allow the Congressional Budget Office (CBO) to better project the long-term savings associated with preventing chronic disease states, such as obesity, heart disease and diabetes.

This legislation would permit leaders in Congress to request that the CBO estimate the long-term health savings that are possible from preventive health initiatives. Congressional leaders would be able to request an analysis of the two 10-year periods beyond the exiting 10-year scoring window, for a total of 30 years. Within this extended window, CBO would be required to determine – based on its review of credible and publically-available epidemiological projection models, clinical trials or observational studies in humans – whether the initiative would result in substantial savings outside the normal scoring window. This change would offer significant recognition to the role prevention plays in saving taxpayer dollars.

Nowhere is this more evident than in the case of obesity -- a complex, multifactorial, and chronic disease, which requires a comprehensive approach to both prevent and treat. Obesity is a major contributor to a large number of preventable deaths in the United States and it usually carries with it a large number of related conditions such as diabetes, hypertension, heart disease, certain cancers, sleep apnea, and arthritis. Therefore, efforts to both prevent *and* treat obesity will not only improve the health and quality of life for those affected, they will save our country billions of dollars by reducing future healthcare costs.

For example, the Trust for America's Health's 2012 report, *Bending the Obesity Cost Curve*, found that reducing the average body mass index by just five percent in the United States could lead to more than \$29 billion in healthcare savings in just five years, due to reduced obesity-related costs. The analysis found that the country could save \$158.1 billion in 10 years and \$611.7 billion in 20 years.

Without being able to credit prevention programs for long-term budgetary savings, the current CBO scoring process for prevention-related bills greatly distorts the impact that these programs have on federal spending. While prevention programs may require an initial investment that may be associated with short-term upfront costs, the long-term costs associated with treating the diseases that these programs are meant to prevent may be greatly reduced.

The Obesity Care Continuum believes that it is time for the CBO to reconsider its methods for estimating costs and savings associated with prevention programs and to recognize that treating obesity is, in fact, a tremendous prevention program for so many other obesity-related conditions. Please show your support for this effort by co-sponsoring the Preventive Health Savings Act (HR 2663/S 1422).

For more information about the Obesity Care Continuum, please contact OCC Washington Coordinator Christopher Gallagher at 571-235-6475 or via email at chris@potomaccurrents.com

About the Obesity Care Continuum

The Obesity Care Continuum was established in 2011 and currently includes the Obesity Action Coalition, The Obesity Society, Academy of Nutrition and Dietetics, the American Society for Metabolic and Bariatric Surgery, and the American Society of Bariatric Physicians. With a combined membership of over 125,000 healthcare professionals, researchers, educators and patient advocates, the OCC is dedicated to promoting access to, and coverage of, the continuum of care surrounding the treatment of overweight and obesity. The OCC also challenges weight bias and stigma oriented policies – whenever and wherever they occur.