Moving the Needle on Obesity:
A Report Card for the 114th Congress
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Overall Grade: C
The Campaign to End Obesity (the “Campaign”) reviewed the activity of the 114th Congress in addressing obesity. This review showed an increased interest in—and support for—policy approaches combating the obesity epidemic. But, despite this increased engagement, Congressional action to advance these policies has been minimal, earning both chambers an overall “C” grade in our first-ever report card.

In 2010, the non-partisan Congressional Budget Office (CBO) released a report describing the obesity epidemic as “perhaps the most pressing public health problem facing the country.” Today, more than one-third of U.S. adults and one in five children struggle with obesity. Obesity is associated with over 90 chronic medical conditions, including cardiovascular disease, diabetes, arthritis, stroke, and cancer.

The costs of obesity are thus staggering; indeed, obesity is considered to be one of the largest contributors to America’s rising health costs. In 2010, CBO reported that increased rates of obesity among adults and children was responsible for nearly 20 percent of the increase in U.S. health care spending between 1987 and 2007. In fact, medical spending directly attributable to obesity is now about $315.8 billion annually, which—to put that figure into context—is roughly half of what Americans spend every year on physician and clinical services. Congress is clearly beginning to understand the dire health and economic ramifications of the U.S. obesity epidemic and economic policy considerations seem to have been a major driver of some of the more thoughtful obesity prevention and treatment proposals in the 114th Congress.

What follows is a breakdown of the 114th Congress’ efforts in four main components of obesity policy and a guide for areas where policymakers on Capitol Hill can truly move the needle in the 115th Congress.

**METHODOLOGICAL CONSIDERATIONS:**

Enacting legislation on Capitol Hill is an iterative process and does not occur overnight. Accordingly, this analysis is not based solely upon the completion of legislative actions to address the U.S. obesity epidemic. In assigning grades for the four components below, moreover, this analysis considered:

1. **Progress,** including incremental progress from previous Congress(es);
2. **Traction,** as measured by the breadth and depth of Congressional support for and engagement on policy;
3. **Content,** especially on measures specifically designed to address obesity and related, other innovative proposals; and
4. **Preservation** of key policy gains from prior Congresses.

**HEALTH**

The 114th Congress gets a C grade for its work on health care legislation to address obesity.

The introduction of the *Treat and Reduce Obesity Act of 2015* (H.R. 2404/S. 1509), championed by Representatives Erik Paulsen (R-MN-03) and Ron Kind (D-WI-03) and Senators Tom Carper (D-DE), Bill Cassidy (R-LA), Chuck Grassley (R-IA), Martin Heinrich (D-NM), Lisa Murkowski (R-AK), and Chris Coons (D-DE), was one important step.

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Congress made in giving adult patients access to obesity treatment options. The Treat and Reduce Obesity Act would provide support to the 40 percent of Medicare beneficiaries with obesity by granting them increased access to medically-relevant, effective, and safe treatment options. The House and Senate versions of the legislation enjoyed robust, bipartisan support and, by the end of the 114th Congress, the bills garnered 176 bipartisan cosponsors, up 56 total co-sponsors from the version introduced in the 113th Congress.

Other noteworthy proposals and actions from the 114th Congress relating to the prevention or treatment of obesity included:

- The Senate introduction of the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act of 2016. This legislation was the result of work done by the Senate Finance Chronic Care Working Group to address chronic disease by improving prevention, treatment, and care in the U.S. Included in the legislation is a provision requesting a Governmental Accountability Office (GAO) study on the impact of obesity drugs on patient health and spending for non-Medicare patients and Medicare beneficiaries. We applaud the CHRONIC lead authors, including Senators Michael Bennet (D-CO), Orrin Hatch (R-UT), Johnny Isakson (R-GA), Mark Warner (D-VA), and Ron Wyden (D-OR), for their work on this issue.
- Passage of the Medicare and CHIP Reauthorization Act (P.L. 114-10), which included continued funding for the childhood obesity demonstration project for fiscal years 2016 and 2017.
- Passage of the 21st Century Cures Act, which unfortunately included cuts to the Prevention and Public Health Fund established under the Affordable Care Act.

We know a key determinant of healthy weight is an individual’s ability to access nutritious foods in appropriate quantities. This is particularly important in low-income and minority communities, where there are disproportionately high rates of obesity, and challenges accessing healthy foods (e.g. food deserts).

One way to ensure that children are able to access more nutritious foods is through the school meal program. America’s school lunch program alone provides free or low-cost meals to 21.7 million children every day. In 2010, legislation was passed that ensure that foods available to children in school met certain nutritional requirements. Unfortunately, the 114th Congress missed opportunities to bolster the availability of healthy foods through a reauthorization of the 2010 legislation (the so-called Healthy, Hunger-Free Kids Act of 2010), which authorized funding and set policy for the United States Department of Agriculture’s core child nutrition programs: the National School Lunch Program; School Breakfast Program; Special Supplemental Nutrition Program for Women, Infants, and Children (WIC); Summer Food Service Program; and, the Child and Adult Care Food Program.

Senate Agriculture Committee Chairman Pat Roberts (R-KS) did introduce a Senate bill, the Improving Child Nutrition and Integrity Access Act of 2016, with Ranking Member Debbie Stabenow (D-MI) that would have continued to ensure the availability of healthy foods in schools. The Roberts/Stabenow bill had the support of many influential organizations in the nutrition

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community, including the Pew Charitable Trusts, the American Heart Association, and the American Academy of Pediatrics. Though the measure was reported favorably out of the Committee, it was unable to get a full Senate floor vote before the 114th Congress adjourned at the end of the year.

**PHYSICAL ACTIVITY**

The 114th Congress received a B- grade for its work advancing legislation to promote increased physical activity levels for all Americans.

Studies show that sedentary adults pay $1,500 more per year in health care costs than physically active adults.

The ever-rising cost of health care due to physical inactivity is a problem we cannot afford to ignore.

Studies show that sedentary adults pay $1,500 more per year in health care costs than physically active adults.

The House and Senate introduced 51 bills addressing physical activity as a component of combating obesity, making policy efforts to encourage and facilitate safe physical activity among the most noteworthy of the 114th Congress. Among the more noteworthy were:

- **The Promoting Physical Activity for Americans Act of 2015** (S. 1793), led by Senators Patty Murray (D-WA) and Roger Wicker (R-MI). This legislation would require the U.S. Department of Health and Human Services (HHS) to publish a report at least every ten years with physical activity recommendations for Americans, similar to the Dietary Guidelines, and would make it easier for the Physical Activity Guidelines to have appropriate funding to move forward with the updates.

- **The Fitness Integrated into Teaching (FIT) Kids Act** (H.R. 2013/S. 1075), led by Representatives Ron Kind (D-WI-03) and Patrick Meehan (R-PA-07) and Senator Kirsten Gillibrand (D-NY). The FIT Kids Act, which has been introduced in the past Congresses, promotes physical activity by strengthening grants to U.S. schools for expanding or enhancing physical education programs for K-12 students.

- **The Personal Health Investment Today (PHIT) Act** (H.R. 1218/S. 2218) led by Representatives Charles Boustany (R-LA-03) and Ron Kind (D-WI-03) and Senators John Thune (R-SD), Joe Donnelly (D-IN), Johnny Isakson (R-GA), and Chris Murphy (D-CT). The PHIT Act is designed to prevent illness and costs associated with obesity and sedentarism through tax incentives aimed at increasing participation in physical activity and fitness. The legislation saw an increase in co-sponsors from the 113th to the 114th Congress—during the 113th, the bill was only introduced in the House and had 50 co-sponsors. During the 114th, the received 101 bipartisan, bicameral co-sponsors.

**ECONOMICS**

The 114th Congress received a C- grade for responding to the acute economic challenge posed by the obesity epidemic with new economic policy tools.

Absent concerted efforts to address the obesity epidemic, obesity will cost the U.S. an estimated 21 percent ($344 billion annually) of our total health care costs by 2018.

Members of Congress have become increasingly aware of this challenge, and introduced two pieces of legislation to address it. The **Long-Term Studies of Comprehensive Outcomes and Returns for the Economy (SCORE) Act** (H.R. 282/2.2260) and the **Preventive Health Savings Act** were both introduced in the 114th Congress. The Long-Term SCORE Act was led by **Representatives Reid Ribble** (R-WI-08) and **Mark Pocan** (D-WI-02) while the Preventive Health Savings Act (H.R. 3660/S. 3126) was led by **Senators Angus King** (I-ME), **Ben Cardin** (D-MD), **Mike Crapo** (D-ID), **Tom Udall** (D-NM), and **Jeanne Shaheen** (D-NH) and **Representative Michael Burgess** (R-TX-26) with an additional twenty-six additional original co-sponsors in the House. Both proposals would provide for new analyses to help lawmakers better comprehend the long-

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Both proposals would provide for new analyses to help lawmakers better comprehend the long-term budgetary impact of policies that curb U.S. obesity rates by ensuring the ability of the Congressional Budget Office (CBO) to provide regular, long-term budget estimates of such proposals.

CBO itself deserves some credit as well for stepping up on the economic issues linked to obesity. In October 2015, CBO released an analysis articulating the potential impact of such policies and the challenges in providing accurate budget forecasts, laying an important foundation for additional policy activity.

**EXTRA CREDIT: OPPORTUNITIES FOR IMPROVEMENT**

Despite some valued legislative activity aimed at moving the needle on the obesity epidemic in the 114th Congress, policymakers have significant opportunities to advance measures aimed at stemming the tide of the obesity epidemic. The 115th Congress offers these and other specific opportunities for action:

- Enactment of legislation from the 114th to help Americans with obesity access more health resources, including the *Treat and Reduce Obesity Act*;
- Pursuing tax policies that would help drive resources to communities that most lack safe physical activity spaces and healthy foods;
- Ensuring that an emphasis on preventing obesity in children is a priority when the Children’s Health Insurance Program (CHIP) is reauthorized;
- Supporting and promoting the Physical Activity Guidelines, which provide science-based recommendations on levels of physical activity, upon their release;
- Protecting important funding in the relevant appropriations bills, especially monies made available to expand on local outreach programs combating obesity;
- Ensuring that nutrition standards and health food options are not rolled back in a reauthorization of the child nutrition laws; and
- Preserving prevention and public health policies and programs that can help address obesity in any revisions to the Patient Protection and Affordable Care Act.

We urge members of the 115th Congress to continue to protect the interests of all Americans by addressing this public health crisis through concrete legislative action.
About the Campaign

To help move the needle in the fight against obesity, the Campaign to End Obesity ("Campaign") convenes leaders from across industry, academia, and public health to push for policy changes to address this epidemic. The Campaign provides the information and guidance necessary for decision-makers to make policy changes designed to reverse one of the nation’s costliest and most prevalent diseases.

Members of Congress Who Excelled “Top of the Class” in the 114th Congress include:

- Senator Mike Bennet (D-CO)
- Senator Tom Carper (D-DE)
- Senator Bill Cassidy (R-LA)
- Senator Chris Coons (D-DE)
- Senator Joe Donnelly (D-IN)
- Senator Kirsten Gillibrand (D-NY)
- Senator Chuck Grassley (R-IA)
- Senator Orrin Hatch (R-UT)
- Senator Martin Heinrich (D-NM)
- Senator Johnny Isakson (R-GA)
- Senator Lisa Murkowski (R-AK)
- Senator Chris Murphy (D-CT)
- Senator Patty Murray (D-WA)
- Senator Pat Roberts (R-KS)
- Senator Debbie Stabenow (D-MI)
- Senator John Thune (R-SD)
- Senator Mark Warner (D-VA)
- Senator Roger Wicker (R-MS)
- Senator Ron Wyden (D-OR)
- Representative Charles Boustany (R-LA-3)
- Representative Michael Burgess (R-TX-26)
- Representative Diana DeGette (D-CO-01)
- Representative Ron Kind (D-WI-03)
- Representative David McKinley (R-WV-01)
- Representative Patrick Meehan (R-PA-07)
- Representative Frank Pallone (D-NJ-06)
- Representative Erik Paulsen (R-MN-03)
- Representative Mark Pocan (D-WI-02)
- Representative Reid Ribble (R-WI-08)