



Testimony of
Children's National Medical Center

Before the
House Health and Government Operations Committee

HB 216
Public Health - Task Force on Childhood Obesity

Presented by:
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Good afternoon. Chairman Hammen, Vice Chairman Pendergrass, and members of the Committee, my name is Tim Jones, and I am Manager of State Government Affairs at Children's National Medical Center. I appreciate the opportunity to testify before the committee today in support of House Bill (HB) 1176 and I commend Delegate Pena Melnyk for taking a leadership role in addressing the issue of childhood obesity.

Children's National Medical Center (Children's), a 283 bed not-for-profit academic medical center, is located in Washington, DC, but serves the pediatric needs of the broader Washington metropolitan region. Located just three miles from the Maryland border, children's annually devotes nearly 60% of our inpatient care to children from Maryland. With five outpatient centers in Maryland and specialty care services provided in eight Maryland locations, Children's is proud to be one of the largest providers of high quality pediatric primary, specialty and emergency care to Maryland's children and families.

According to the Centers for Disease Control and Prevention, more than 9 million children between the ages of 6 and 19 are overweight or obese - a number that has tripled since 1980. The U.S. Department of Health and Human Services estimates overweight adolescents have a 70 percent chance of becoming overweight or obese adults. This increases to 80 percent if one or more parent is overweight or obese.

The Trust for America's Health 2007 report, *F as in Fat*, estimates 24 percent of adults in Maryland are obese and 13 percent of children ages 10-17 are overweight. That same report estimates 16 percent of high school students in Maryland are overweight and at risk of obesity. At Children's, we are now seeing children with complications from obesity that are normally exhibited as an adult, such as diabetes, hypertension, dyslipidemia, liver disease, sleep apnea, and heart disease.

According to a 2005 U.S. Government Accountability Office report, the rise in obesity-related health conditions also introduces added economic costs. Nationwide, obesity-related health expenditures are estimated to have accounted for more than 25 percent of the growth in health care spending between 1987 and 2001. In 2000, an estimated \$117 billion was spent for health-related expenditures due to obesity, with direct costs accounting for an estimated \$61 billion.

There is no magic pill that will solve the problem of childhood obesity. Of course healthy eating and exercise are key components to losing weight and leading a healthy lifestyle, but the factors that contribute to childhood obesity are complex and many. Home and play environments, family traditions and attitudes toward food, and psychological and social issues all play a role in childhood overweight and obesity. To address the issue in a comprehensive manner, Children's recently launched a new multidisciplinary Obesity Institute that will house all of the hospital's clinical research, prevention and treatment initiatives.

Children's commends Delegate Pena Melnyk for recognizing the many factors that contribute to childhood overweight and obesity and for crafting a bill that takes a comprehensive approach to the issue. From looking into medical reimbursement policies that may limit children's access to comprehensive obesity treatment to school nutrition and physical education standards, HB 1176 is a positive, proactive first step to addressing a complex and critical health care issue.

Again, I commend Delegate Pena Melnyk and the cosponsors of HB 1176 for their leadership. I'd be happy to take questions.