“Maddie” is a 10-year-old girl who is seen for a well visit. Her BMI is at the 87th percentile, which is a 3 point increase from last year. Review of her diet and exercise shows that she drinks chocolate milk every day at school, has a TV in her bedroom, and gets less than an hour per day of exercise. Her parents would like to sign her up for a pediatric weight management program at the local YMCA, but are unsure whether insurance will cover it.

“Ryan” is a 12-year-old boy who is in for an asthma recheck. His last well visit was 6 months ago, when his BMI was at the 94th percentile. Today, it’s at the 96th percentile, and his asthma is getting worse. His family would like to see a dietician, but only if it’s covered by insurance.

With overweight and obesity affecting 1 out of 3 children in the United States, these scenarios are all too common in clinic. Many families are ready to make changes, but significant referral and payment issues stand in the way. Health plans may or may not cover visits with a dietician or weight specialist. A community-based program may be too costly to pay for out of pocket. Clinicians have a limited amount of time to counsel patients and families and are dependent on payment.

In an effort to clear up any confusion about which pediatric obesity services were or were not covered, the Minnesota Chapter of the American Academy of Pediatrics (MNAAP) helped launch a multi-sector collaborative called the Minnesota Partnership on Pediatric Obesity Care and Coverage (MPPOCC), which is made up of major health plans, health systems, government agencies, hospitals, clinics and community organizations that have a stake in lowering pediatric obesity rates.

In January of 2015, MNAAP partnered with MPPOCC to plan and host a free webinar titled “Pediatric Obesity Services: What’s Covered in Minnesota?” for primary care providers, which was funded through a grant from AAP’s Section on Administration and Practice Management.

The content was covered by representatives from two major health plans, the Minnesota Department of Human Services, Children’s Health Network, and a pediatrician member. They explained insurance coverage for a range of services, suggested appropriate billing and CPT codes, and recommended resources to ensure claims are properly submitted and accepted. They also answered questions from participants via phone and chat.

Though private coverage varies, they explained that Medicaid coverage for obesity services includes visits with primary care and specialty clinicians, dieticians, nurses, counselors and Community Health Workers. In fact, Medicaid covers at least 25 hours of what it calls “comprehensive, intensive behavioral interventions.” In addition to screening, education and assessment, it also covers counseling and surgery.

At least 130 people attended the webinar from various organizations all over the state. A link to the archive was sent to another 53 people who couldn’t attend. It is now posted on the MNAAP website at http://mnaap.org/obesity.htm, which has been accessed by more than 221 individuals since the webinar took place.

The webinar was deemed a huge success by participants, planners and collaborators. The majority of participants (97 percent) said they found the webinar helpful or very helpful in a follow-up survey. Finally, it has spurred further collaboration and communication between health plans, clinics and government agencies working to prevent and reduce pediatric obesity.