Elevated Medical Costs for Obese Fifth Graders in California and Texas

Levitt DE, Jackson AW, and Morrow JR

Department of Kinesiology, Health Promotion, and Recreation; University of North Texas; Denton, TX

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Advisor / Mentor: Vingren, JL (Jakob.Vingren@unt.edu)

ABSTRACT

Finkelstein et al. (2014) estimated that an obese ten-year-old, typically in the fifth grade, will incur between $12,660 and $19,630 in direct medical costs beyond those of a normal-weight ten-year-old over a lifetime. PURPOSE: The purpose was to estimate the lifetime direct medical costs attributable to obesity for fifth graders in the two most populous states, Texas and California. METHODS: Body composition data from the Presidential Youth Fitness Program’s FITNESSGRAM® administered in California and Texas each school year from 2010–2011 to 2012–2013 were used. Data included information on 447,619–456,409 fifth graders each year in California and 296,887–337,514 fifth graders in Texas. The number and percentage of students in each of the FITNESSGRAM® body composition categories was calculated and those in the Needs Improvement – High Risk (NI – HR) were used for cost estimation. The number of students in the NI – HR category for each year in each state was multiplied by the recommended cost estimate of $19,000 to project the elevated lifetime medical costs attributable to obesity for each group of fifth graders in each state. RESULTS: More than 33% of fifth graders in California and more than 36% of fifth graders in Texas were categorized as NI – HR each year over the 3-year period. Results indicate that the increased lifetime direct medical costs due to obesity will be nearly $3 billion for each group of fifth graders in California and more than $2 billion for each group of fifth graders in Texas. CONCLUSIONS: When the percentage of obese fifth graders is extrapolated to the entire United States’ 4 million 10-year-olds, this results in more than $25 billion in elevated direct lifetime medical costs attributable to obesity for this 1-year age cohort. These estimates are for obesity and do not include the additional costs associated with overweight (i.e., FITNESSGRAM® Needs Improvement – Some Risk category). This information should be used to influence spending decisions and resource allocation to obesity reduction and prevention efforts.