Overweight and obesity are both labels for ranges of weight that are greater than what is generally considered healthy for a given height. For adults, overweight and obesity ranges are determined by using weight and height to calculate a number called the “body mass index” (BMI), which correlates with the amount of body fat. An adult who has a BMI between 25 and 29.9 is considered overweight, 30 or higher is considered obese, and 40 or more is defined as severely obese. Obesity can lead to hypertension, heart disease, stroke, high cholesterol, diabetes, certain cancers, and respiratory difficulty.

A Centers for Disease Control (CDC) Study released in November 2007, showed that more than one-third of U.S. adults—over 72 million people—were obese in 2005-2006. This includes 33.3 percent of men and 35.3 percent of women. Adults aged 40-59 had the highest obesity prevalence compared with other age groups. There were also large race-ethnic disparities in obesity prevalence among women. Approximately 53 percent of non-Hispanic black women and 51 percent of Mexican-American women aged 40-59 were obese compared with about 39 percent of non-Hispanic white women of the same age. (http://www.cdc.gov/nccdphp/dnpa/obesity/index.htm)

The obesity rate in the United States has increased at an alarming rate over the past three decades. States in the southeast have higher prevalence than states on the West Coast, the Midwest and the Northeast of obesity. Sixteen percent of children and adolescents are overweight and 34% are at risk of becoming overweight. (Wang, Y., Beydoun, M., The Obesity Epidemic in the United States—Gender, Age, Socioeconomic, Racial/Ethnic, and Geographic Characteristics: A Systematic Review and Meta-Regression Analysis. Epidemiologic Reviews Advance Access published on January 1, 2007, DOI 10.1093/epirev/mxm007. Epidemiol Rev 29: 6-28.)

The combined direct and indirect costs of obesity to the US was assessed at $123 billion in 2001. (http://www.eatlas.idf.org/) Most of the cost associated with obesity is due to type 2 diabetes, coronary heart disease, and hypertension. (http://www.surgeongeneral.gov/topics/obesity/calltoaction/1_3.htm)

The percentage of young people who are overweight has more than tripled since 1980. Among children and teens aged 2–19 years, just over 16 percent were considered overweight as of 2006. Thus obesity related expenses can be expected to rise in the foreseeable future (http://www.cdc.gov/nccdphp/dnpa/obesity/index.htm).

In fiscal year 2007:

11,478 Medicaid recipients had paid claims associated with a primary diagnosis of obesity or 1.37% of the total Medicaid recipient population.

Total medical expenditures for this population were $83,573,434, accounting for 2.52% of the state Medicaid expenditures.

Using paid claims, statewide prevalence rates for obesity between 2005 and 2007 decreased by 0.3 cases per 1,000 recipients.

### SC Population Demographics in 2007

<table>
<thead>
<tr>
<th>Ages</th>
<th>Race</th>
<th>Gender</th>
<th>Geographic Residence</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 and Under</td>
<td>4,397</td>
<td>Black</td>
<td>6,316</td>
</tr>
<tr>
<td>19-64</td>
<td>6,574</td>
<td>White</td>
<td>4,189</td>
</tr>
<tr>
<td>65+</td>
<td>507</td>
<td>Hispanic</td>
<td>356</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other</td>
<td>617</td>
</tr>
</tbody>
</table>

### Counties With the Largest Numbers Related to Obesity

<table>
<thead>
<tr>
<th>Top 10 counties by prevalence (Number of cases per 1,000 Medicaid recipients)</th>
<th>Top 10 counties by Medicaid dollars paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jasper 27.4 Calhoun 21.0</td>
<td>Richland $7,549,670 Florence $3,825,655</td>
</tr>
<tr>
<td>Marlboro 23.5 Bamberg 18.6</td>
<td>Spartanburg $6,460,664 Horry $2,841,441</td>
</tr>
<tr>
<td>Chester 23.3 Lee 18.3</td>
<td>Greenville $6,142,355 Orangeburg $2,828,153</td>
</tr>
<tr>
<td>McCormick 23.2 Georgetown 18.1</td>
<td>Charleston $5,540,648 Beaufort $2,480,335</td>
</tr>
<tr>
<td>Beaufort 22.7 Oconee 17.5</td>
<td>Lexington $3,911,475 Sumter $2,430,450</td>
</tr>
</tbody>
</table>

### Suggested citation: