Centers for Medicare & Medicaid Services
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Health Care Quality Measures

BRIEF

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Promoting Healthy Weight Management in Medicaid and CHIP Managed Care

Background

Obesity is a major driver of poor health outcomes and health care costs in the United States.[1] It is associated with chronic conditions such as type 2 diabetes, heart disease, asthma, and certain cancers, as well as increased risk of pregnancy complications and premature mortality.[2] Among individuals enrolled in Medicaid and the Children's Health Insurance Program (CHIP), roughly 25 percent of children and 40 percent of adult Medicaid beneficiaries have obesity.[3,4]

Addressing obesity and its underlying drivers through healthy weight management is a priority of the administration's Make America Healthy Again (MAHA) Strategy and is critical to improving long-term health outcomes. This includes identifying individuals at risk for obesity, ensuring access to services such as nutrition counseling and behavioral interventions, and supporting sustained behavior change through improved diet and physical activity. The *Make Our Children Healthy Again Strategy Report*[5] encourages State Medicaid and CHIP agencies and managed care plans to promote and measure health outcomes related to nutrition and physical activity.

As the dominant delivery system for Medicaid and CHIP,[6] managed care is a key lever for advancing healthy weight management. States can promote these efforts through managed care plan (MCP) contracts, oversight, and accountability mechanisms. MCPs, in turn, support these efforts by providing services such as nutrition counseling and behavioral interventions which may be covered under state plan or other authorities, incentivizing providers to deliver those services, and using quality improvement (QI) activities to improve screening, referral, and follow-up.

This brief highlights non-pharmaceutical strategies to promote healthy weight management through Medicaid and CHIP managed care, with a particular focus on nutrition, physical activity, and behavioral interventions.

Using Measures to Advance and Monitor Healthy Weight Management

Measurement is a core driver of QI in Medicaid and CHIP managed care, embedded across program design, operations, and oversight. Measures translate priorities—such as improving nutrition and physical activity—into specific expectations that can be incorporated into contracts, tied to incentives, and tracked over time. They

Measuring and Monitoring Progress in Healthy Weight Management in Medicaid and CHIP Managed Care

The Centers for Medicare & Medicaid Services (CMS) has identified an example measure slate that states and MCPs can use to select measures to support the design, implementation, and evaluation of strategies outlined in this brief to promote healthy weight management. It spans key stages of the care continuum—such as screening, service delivery, and outcomes—to help states and plans track progress and identify areas for improvement. The measure slate is available at https://www.medicaid.gov/medicaid/quality-of-care/downloads/measuring-progress-healthy-weight-management.pdf.

[1] https://www.cdc.gov/chronic-disease/data-research/facts-stats/index.html.

[2] https://www.cdc.gov/chronic-disease/about/.

[3] https://www.cdc.gov/chronic-disease/data-research/facts-stats/index.html.

[4] https://www.macpac.gov/wp-content/uploads/2022/12/MACSTATS_Dec2022_WEB-508.pdf.

[5] https://www.whitehouse.gov/wp-content/uploads/2025/09/The-MAHA-Strategy-WH.pdf.

[6] https://www.macpac.gov/publication/percentage-of-medicaid-enrollees-in-managed-care-by-state-and-eligibility-group/.

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enable states to assess progress, identify gaps, and refine QI activities.

States and MCPs can use measures not only to track overall performance in healthy weight management, but also to benchmark across plans and providers, identify variation across populations, and target interventions where gaps are greatest. Stratifying measures by factors such as age or geography can help uncover differences in screening, counseling, and access to nutrition and weight management services.

Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)[7] is among the most reported quality measures in Medicaid and CHIP managed care.[8] Included in the Child Core Set, WCC assesses whether children and adolescents ages 3 to 17 received appropriate weight assessment and counseling, including body mass index (BMI) percentile documentation, nutrition counseling, and physical activity counseling.

Strategies for Promoting Healthy Weight Management in Medicaid and CHIP Managed Care

States can use Medicaid and CHIP managed care to promote healthy weight management through a set of complementary policy, financing, and operational strategies. As shown in **Figure 1**, this brief highlights several managed care strategies—including targeted managed care contracting, quality assurance and performance improvement (QAPI) programs, plan and provider incentives, beneficiary incentives, and external quality review organization (EQRO) partnerships—that can work together to influence care delivery and improve outcomes.

Figure 1. Strategies for Promoting Healthy Weight Management in Managed Care

Targeted Contracting

Targeted managed care contracting is a core strategy states can use to promote healthy weight management. Through contracts with MCPs, states define the scope of Medicaid and CHIP services provided under managed care[9], authorize in lieu of services or settings (ILOSs)[10], set expectations for care delivery and coordination, and establish reporting and oversight requirements. States can use these contracting levers to require coverage of obesity-related services, enable flexible service delivery, and strengthen linkages to community-based supports.

Delaware Medicaid requires MCPs to provide a range of obesity treatment services, including nutrition counseling, intensive behavioral therapy, obesity medications, and metabolic and bariatric surgery.[11] Ensuring coverage of multiple treatment modalities supports individualized care, increases the likelihood of clinically meaningful weight loss, and addresses obesity as a complex, chronic condition.[12]

[7] More information about the measure is available in the companion measure slate, available at https://www.medicaid.gov/medicaid/quality-of-care/downloads/measuring-progress-healthy-weight-management.pdf.

[8] https://www.medicaid.gov/medicaid/quality-of-care/downloads/eqr-table3-measures.pdf.

[9] As a reminder, services included in managed care contracts must be authorized under an approved authority, such as the state plan or a waiver.

[10] An ILOS is a service or setting provided to a managed care enrollee as a substitute for a covered service or setting under the state plan. ILOSs must comply with federal requirements, including 42 CFR §§ 438.3(e)(2), 438.16, and 457.1201(e) and are voluntary for MCPs to offer and enrollees to use.

[11] Coverage is established through SPA 16-010 (preventive services), SPA DE-19-0009 (anti-obesity medications), and Delaware Medicaid policy governing physician, hospital, and managed care benefits. To learn more, see https://stop.publichealth.gwu.edu/sites/g/files/zaxdzs4356/files/2024-05/de-snapshot.pdf.

[12] https://jamanetwork.com/journals/jama/article-abstract/2812316.

Louisiana Medicaid Healthy Louisiana managed care contracts require MCPs to submit annual Obesity and Diabetes Reports and Obesity and Diabetes Action Plans outlining goals and strategies to improve obesity-related outcomes. By tying obesity data and performance reporting directly to Medicaid managed care contracts, Louisiana has created a model for accountability and data-driven policy—linking health outcomes with program spending and motivating MCOs to invest in prevention.

Wisconsin Medicaid allows MCPs to offer medically tailored meals as an ILOS for enrollees with a high-risk pregnancy or postpartum status, as well as enrollees after a hospital discharge who have diabetes or cardiovascular disease.

Quality Assessment and Performance Improvement (QAPI) Programs

States must require MCPs to implement QAPI programs to assess and improve the quality of care they deliver to enrollees through tools such as performance measurement and performance improvement projects (PIPs).

States and MCPs can use QAPI programs to advance healthy weight management by using performance measures to identify gaps in obesity prevention and management, such as low rates of BMI assessment or nutrition and physical activity counseling. PIPs build on these insights by testing targeted interventions to improve screening, counseling, referral, and engagement in services that support healthy weight.

A **DC Medicaid** MCP implemented a PIP to improve childhood obesity prevention and management by increasing rates of BMI assessment and nutrition and physical activity counseling, as measured by the WCC quality measure.[13] Interventions included enrollee outreach to increase preventive visit attendance, provider training on obesity clinical guidelines and the use of Z-codes to better document social and clinical risk factors, and enhanced care management to engage hard-to-reach families and connect them to preventive and supportive services. It also introduced value-based payment arrangements and provider partnerships to strengthen care coordination and access to healthy weight services. Over the measurement period, performance improved across several areas, including statistically significant increases in nutrition and physical activity counseling among children ages 3 to 11.

Texas Medicaid MCPs implemented PIPs to improve rates of weight assessment and nutrition and physical activity counseling, as measured by the WCC quality measure. Because well-child visits are expected to include BMI assessment and counseling, plans used real-time well-child visit data as a proxy for whether these services were being delivered. This allowed plans to identify enrollees missing preventive services, generate care gap reports, and target outreach to those overdue for visits. MCPs also worked with providers to encourage delivery and improve documentation of BMI assessments and nutrition and physical activity counseling.

Plan and Provider Incentives

States can use Medicaid and CHIP managed care plan and provider incentives to improve healthy weight management by linking payment to performance. At the plan level, states can use financial incentives - such as bonus payments or withhold arrangements - with MCPs[14] tied to quality measures like WCC or the HEDIS Adult BMI Assessment (ABA) to hold MCPs accountable and reward improvement. At the provider level, states can use state directed payments (SDPs) in Medicaid[15] to require MCPs to implement value-based payment (VBP) arrangements with participating providers to incentivize delivery of services that support healthy weight management.

Kentucky Medicaid uses plan-level incentive arrangements to tie MCP performance to the WCC quality measure, including a withhold arrangement for not meeting specified performance targets. To complement these plan-level incentives, the state also uses an SDP to align provider payments with performance on WCC (specifically the BMI assessment rate).

[13] WCC is Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents.

[14] 42 CFR § 438.6(b)(2)-(3).

[15] SDPs must comply with all federal requirements, including 42 CFR § 438.6(c) and the respective limit on total provider payment rates. More information on SDPs is available at https://www.medicaid.gov/medicaid/managed-care/guidance/state-directed-payments.

Beneficiary Incentives

MCPs can promote healthy weight management by offering beneficiary incentives tied to preventive care and healthy behaviors. These incentives can encourage participation in specific services such BMI screenings and nutrition and physical activity counseling, as well as engagement in disease management and lifestyle programs

These incentives are generally offered as value-added services in addition to covered Medicaid and CHIP benefits. As a result, the costs for these additional services cannot be included when developing capitation rates.[16]

Evidence from Medicaid and CHIP and other health programs shows that beneficiary incentives can increase participation in preventive care and other targeted health behaviors, particularly in the short term.[17]

New Mexico Medicaid MCPs offer a range of incentives as value-added services to encourage beneficiary engagement in preventive care and healthy weight behaviors. For example, one MCP's Step-Up Wellness Challenge provides a free pedometer and rewards increased daily step counts with a $25 credit to the plan's online store. Another MCP offers $25 gift cards for completing BMI screenings, nutrition counseling, and physical activity counseling- services aligned with the WCC quality measure, which the state can use to monitor the impact of the incentives. Plans also offer reduced-cost access to gym memberships and fitness equipment through a Member Discount Program.

A **Louisiana Medicaid** MCP offers a value-added service mobile application with a rewards-based wellness program that encourages enrollees to engage in healthy behaviors. Enrollees earn redeemable reward points by completing eligible wellness activities, including working with a wellness coach to set goals related to healthy eating, physical activity, and weight management. The application also allows enrollees to track their progress and access wellness resources.

External Quality Review Organization (EQRO) Partnerships

States contract with EQROs to provide independent, actionable insight into the quality of care delivered by Medicaid and CHIP MCPs, making EQROs a key lever for advancing healthy weight management. Through required external quality review (EQR) activities—such as validation of performance measures and PIPs—EQROs help ensure the accuracy of measures like WCC and identify gaps in screening, counseling, and follow-up care across plans. This enables states to target QI efforts and hold MCPs accountable for performance.

States can also engage EQROs to implement optional EQR activities to generate deeper insight and inform strategy. For example, encounter data validation can strengthen the completeness and reliability of WCC and other healthy weight-related measures, while focused studies can surface variation in access to nutrition and weight management services across populations, regions, or plans. Beyond EQR activities, EQROs can serve as strategic partners in supporting statewide QI initiatives.

North Carolina Medicaid engaged its EQRO to convene its MCPs and partners through a quality symposium- "Balancing the Scales to Weight Inclusive, Whole Child Approaches Supporting Nutrition and Physical Activity"- to review performance data and align improvement strategies. The symposium provided a forum for MCPs together to share insights and strategies to support healthy weight management.

Conclusion

States and MCPs have a range of tools within Medicaid and CHIP managed care to advance healthy weight management. By leveraging managed care contracting, QAPI programs, plan and provider incentives, beneficiary incentives, and EQRO activities, states and MCPs can shape how care is delivered—ensuring that screening, counseling, behavioral interventions, and other services that support healthy weight are consistently provided. Used together, these strategies can expand access to services, strengthen care delivery, and improve health outcomes over time.

[16] 42 CFR § 438.3(e)(1).

[17] https://www.cms.gov/priorities/innovation/innovation-models/mipcd.

Quality measures play a cross-cutting role in helping states set expectations, monitor performance, and assess whether strategies are increasing delivery and use of services that support healthy weight. CMS developed an example measure slate that states and MCPs can use to support the design, implementation, and evaluation of healthy weight management strategies.[18]

For More Information

CMS provides technical assistance (TA) to state Medicaid and CHIP programs and their partners to strengthen the quality of care delivered through managed care. Learn more by visiting CMS's Managed Care Quality Improvement page on Medicaid.gov.[19]

CMS has also developed additional TA resources on addressing childhood obesity in Medicaid and CHIP. Learn more by visiting CMS's Promoting Healthy Weight Management page on Medicaid.gov.[20]

Learn More! Explore the state examples highlighted in this brief using the links below.

Delaware's weight management resources are available at https://dhr.delaware.gov/benefits/weight-management/index.shtml

Louisiana's *2024 Diabetes and Obesity report for the Medicaid Managed Care Program* is available at https://www.ldh.la.gov/assets/docs/LegisReports/ACT210/Act_210_Diabetes_Obesity_Report_Medicaid_4292024.pdf

Information on **Wisconsin's** Medically Tailored Meals In Lieu of Service is available at https://www.dhs.wisconsin.gov/disease/mtmcdpp02252025.pdf

Information on **DC's** Childhood Obesity Management and Prevention PIP is available at https://dhcf.dc.gov/sites/default/files/dc/sites/dhcf/page_content/attachments/2024%20District%20of%20Columbia%20Annual%20Technical%20Report.pdf

Information on **Texas's** WCC PIP is available at https://www.hhs.texas.gov/sites/default/files/documents/eqro-annual-tech-report-contract-yr-2022-companion.pdf

Information on **Kentucky's** MCP withhold contract is available at https://www.hhs.texas.gov/sites/default/files/documents/eqro-annual-tech-report-contract-yr-2022-companion.pdf; information on the state's SDP with an WCC incentive is available at https://www.medicaid.gov/medicaid/managed-care/downloads/KY_Fee.VBP_IPH.OPH.AMC_Renewal_20260101-20261231.pdf

Information on **New Mexico's** member benefits for healthy weight is available at https://turquoiserewards.com/rewards/details/?reward=4d3JSTlV9q246ALQbNOe4Y; https://www.bcbsnm.com/member/blue365-discount-program; and https://www.westernskycommunitycare.com/members/medicaid/benefits-services/healthy-rewards-program.html

Information on **North Carolina's** Balancing the Scales to Weight Inclusive, Whole Child Approaches Supporting Nutrition and Physical Activity is available at https://medicaid.ncdhhs.gov/2023-2024-eqr-technical-report/open

[18] https://www.medicaid.gov/medicaid/quality-of-care/downloads/measuring-progress-healthy-weight-management.pdf.

[19] https://www.medicaid.gov/medicaid/quality-of-care/medicaid-managed-care-quality/managed-care-quality-improvement.

[20] https://www.medicaid.gov/medicaid/quality-of-care/quality-improvement/promoting-healthy-weight-management.