

Meml	Member Name:														A	GE:		_ D	OB	:						
Medicaid ID#:																										
*	Under weight (BMI less than 18)													Н	ealth	y we	eigh	t (BN	II be	twee	n 18	and	24.9	9)		
	Overweight (BMI between 25 and 29.9)														Obese (BMI between 30 and 34.9)											
*	Severly Obese (BMI between 35 and above)																									
	100	110	120	130	140	150	160	170	180	190	200	210	220	230	240	250	260	270	280	290	300	310	320	330		
5'0"	20	21	23	25	27	29	31	33	36	37	39	41	43	45	47	49	51	53	55	57	59	61	63	65		
5'1"	19	21	23	25	27	28	30	32	34	36	38	40	42	44	45	47	49	51	53	55	57	59	61	62		
5'2"	18	20	22	24	26	27	29	31	33	35	37	38	40	42	44	46	48	49	51	53	55	57	59	60		
5'3"	18	19	21	23	25	27	28	30	32	34	36	37	39	41	43	44	46	48	50	51	53	55	57	59		
5'4"	17	19	21	22	24	26	28	29	31	33	34	36	38	40	41	43	45	46	48	50	52	53	55	57		
5'5"	17	18	20	22	23	25	27	28	30	32	33	35	37	38	40	42	43	45	47	48	50	52	53	55		
5'6"	16	18	19	21	23	24	26	27	29	31	32	34	36	37	39	40	42	44	45	47	49	50	52	53		
5'7"	16	17	19	20	22	24	25	27	28	30	31	33	35	36	38	39	41	42	44	46	47	49	50	52		
5'8"	15	17	18	20	21	23	24	26	27	29	30	32	34	35	37	38	40	41	43	44	46	47	49	50		
5'9"	15	16	18	19	21	22	24	26	27	28	30	31	33	34	36	37	38	40	41	43	44	46	47	49		
5'10"	14	16	17	19	20	22	23	24	26	27	29	30	32	33	35	36	37	39	40	42	43	45	46	47		
5'11"	14	15	17	18	20	21	22	24	25	27	28	29	31	32	34	35	36	38	39	41	42	43	45	46		
6'0"	14	15	16	18	19	20	22	23	24	26	27	29	30	31	33	34	35	37	38	39	41	42	43	45		
6'1"	13	15	16	17	19	20	21	22	24	25	26	28	29	30	32	33	34	36	37	38	40	41	42	44		
6'2"	13	14	15	17	18	19	21	22	23	24	26	27	28	30	31	32	33	35	36	37	39	40	41	42		
6'3"	13	14	15	16	18	19	20	21	23	24	25	26	28	29	30	31	33	34	35	36	38	39	40	41		
6'4"	12	13	15	16	17	18	20	21	22	23	24	26	27	28	29	30	32	33	34	35	37	38	39	40		
			*					\Diamond									+					*				
Draw	a lir		, ·	fron	n th	a wa	iaht	•	ha n	atio	nt T)rou	, a li	na a	cros	c fra		ha h	aiah	t of	tha		nt			
Wher													ап	пса	CIUS	5 11 (<i>)</i> 111	iic ii	cigii	t OI	the j	раш	.111.			
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		Ad	lult	<mark>BM1</mark>	ass	essn	<mark>ient</mark>	sho	uld l	<mark>oe c</mark> o	oded	usi	ng I	CD-	10: I	<mark>3MI</mark>	Val	ue s	et Z	6 <mark>8.1</mark> .	- <mark>Z6</mark> 8	<mark>3.45</mark>				
Comp	Completed by:													-	Tit	le: _							_			
Signa	Signature:														Dat	te: _							_			
Office	Naı	me:																								