



Obesity Groups Call on Wisconsin Group Insurance Board to Convene a Special Meeting on State Employee AOM Coverage

On behalf of the Obesity Medicine Association (OMA), the American Society for Metabolic and Bariatric Surgery (ASMBS), The Obesity Society (TOS) and the Obesity Action Coalition (OAC), we urge the Wisconsin Employee Trust Fund (ETF) Group Insurance Board (GIB) to convene a special meeting on state employee coverage of FDA-approved anti-obesity medications (AOMs) prior to the Board's scheduled May 23rd meeting.

For more than a decade, our organizations have been working through ETF staff to provide stakeholder feedback to GIB members regarding scientific-based treatment avenues for providing comprehensive obesity care and the critical need to provide coverage for that care for Wisconsin state employees. Throughout this period, we have shared numerous statements from the medical community and federal and state policymakers recognizing obesity as a complex and chronic disease and calling on public and private health plans to provide coverage for treatment.

We were pleased when these efforts led ETF staff to provide a fair and balanced assessment to GIB members in 2019 that allowed the Board to analyze both the costs, and pros and cons of providing state employee coverage for bariatric surgery as well as precursor weight management and nutrition services beginning in 2020. In its April 14, 2019, memorandum, ETF staff highlighted that "there is evidence that coverage can result in improved member health and quality of life, as well as cost recoupment through comorbid disease improvement."

Unfortunately, ETF staff and its actuarial consultant Segal have not followed this approach in educating Board members about these same issues when providing recommendations associated with state employee coverage for AOMs. Our growing knowledge regarding the complexity of obesity, the tremendous advances in treatment, and the growing recognition of, and support for treating obesity as the chronic disease that it is, clearly make health plans that continue to exclude coverage for AOMs out of date and out of touch with the current scientific evidence surrounding these new pharmaceutical treatments.

Throughout the last two years, we have been disappointed by the lack of urgency exhibited by ETF staff to provide Board members with possible coverage scenarios for this critical treatment avenue. In addition, we are frustrated by the lack of opportunity for any real-time dialogue

between the Board and stakeholders in the healthcare and patient communities during any of the GIB's public meetings – even during the special session at the November 16, 2022, meeting where ETF staff were instructed to “provide a more in-depth overview of weight loss management tools from wellness, medical, and pharmacy programs.”

We know that obesity rates continue to rise with more than 42 percent of Americans affected by obesity nationwide – including more than 37 percent of Wisconsinites who currently struggle with this complex and chronic disease. Despite these facts and the broad acceptance of obesity as a chronic disease and the recognition that patients deserve access to care, many policymakers continue to apply a double standard when evaluating coverage of obesity care – especially in the areas of utilization, cost, and return-on-investment. These points were illustrated by the ETF staff and Segal presentations made during the February 21, 2024, meeting, which clearly did not meet the level of rigor, thoroughness, and objectivity required for addressing this critical treatment issue.

Given the stakes, we are respectfully calling for the GIB to convene a special meeting prior to its scheduled May 23 meeting. The purpose in doing so should be to revisit the discussion on the coverage for AOMs with a new, more thorough cost analysis that considers the long-term public health and economic realities as countless other jurisdictions have reached. This analysis must incorporate realistic assumptions and directly and comprehensively address the many questions and concerns previously raised by both GIB members and concerned stakeholders including expert clinicians, covered state employees, patient advocacy organizations and others.

We trust that the GIB will recognize the urgency and seriousness of this request and act swiftly to address the concerns raised. The health and well-being of our members, and their ability to continue serving the state effectively, depend on it.