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May 18, 2016

Howard Zucker, M.D, J.D.
Commissioner
NYS Department of Health
Corning Tower, ESP
Albany, NY 12224

Dear Commissioner Zucker,

The Obesity Action Coalition (OAC) urges the New York State Department of Health to recognize that obesity is a complex chronic disease and that those affected by obesity should have access to the same medically necessary and covered treatment avenues afforded to all others who suffer from chronic disease, including prevention/counseling, medications, endoscopy and surgery.

Obesity is a multi-factorial chronic disease requiring a comprehensive approach to both prevent and treat. Obesity is associated with a large number of related conditions such as type 2 diabetes, hypertension, heart disease, lipid disorders, certain cancers, sleep apnea, arthritis and mental illness. Therefore, care should not be seen as simply having the goal of reducing body weight, but should additionally be focused on improving overall health and quality of life.

Too often, for too long, private and public health plans have excluded coverage for obesity treatment services -- partly due to shortsighted cost savings efforts and partly due to the false assumption that these services are either not medically necessary, or not in line with generally accepted standards of medical care despite scientific evidence to the contrary.

These discriminatory coverage practices, combined with the growing scientific evidence surrounding obesity, led the American Medical Association (AMA) to declare obesity as a disease in 2013 and subsequently adopt formal policy supporting "patient access to the full continuum of care of evidence-based obesity treatment modalities such as behavioral, pharmaceutical, psychosocial, nutritional, and surgical interventions." Numerous other healthcare professional and patient organizations support the AMA policy because these groups recognize that obesity is associated with, or a precursor to, more than 30 other chronic medical conditions including cardiovascular disease, diabetes, and cancer.

Over the last ten years, significant medical advances have been made in the development of obesity drugs. That fact combined with our country's current and growing obesity epidemic, clearly make health plans that continue to exclude coverage for FDA-approved obesity drugs out of date and out of touch with the current scientific evidence surrounding these new pharmaceutical treatments. For example, in the last few years, the



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FDA has approved four obesity drugs (Belviq, Contrave, Qsymia and Saxenda), and several other promising drugs are quickly progressing through the agency's approval process.

We understand that the State's Medicaid program includes a prohibition on "drugs whose sole clinical use is the reduction of weight." While the above listed medications, and others currently in development, focus on obesity, it is the reduction of the excess weight that contributes to the improvement of related chronic diseases, such as diabetes, hypertension, sleep apnea, GERD and many others. Therefore, the OAC urges the New York State Department of Health to provide coverage under the State's Medicaid program for all FDA-approved obesity drugs so that Medicaid beneficiaries may have access to another key component of comprehensive obesity treatment.

A handwritten signature in black ink, appearing to read "Joseph Nadglowski, Jr.", is positioned above the typed name.

Joseph Nadglowski, Jr.
President/CEO