



November 12, 2025

The Honorable Ed Oliver
Alabama House of Representatives
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The Obesity Action Coalition (OAC) appreciates the opportunity to provide comments to the Alabama Chronic Weight Management and Type 2 Diabetes Task Force – urging them to support state employee health plan and Medicaid coverage for comprehensive obesity care including intensive behavioral therapy, FDA-approved obesity medications, and metabolic and bariatric surgery.

The OAC is the leading national non-profit organization dedicated to giving a voice to individuals affected by the disease of obesity. The OAC proudly serves more than 2,711 members living in Alabama and backed by more than 90,000 members across the United States. Throughout the past decades, the prevalence of obesity has skyrocketed across our country and in Alabama – with more than 38 percent of adults and more than 22 percent of children (ages 6-17) in the state currently affected by obesity.

Obesity is a serious chronic disease that requires treatment and management like diabetes, cancer, or high blood pressure. Obesity is recognized as a disease by major medical organizations such as the American Diabetes Association, American Medical Association, American Academy of Family Physicians, American Association of Clinical Endocrinologists, American Heart Association, National Institutes of Health, The Obesity Society and the World Health Organization.

Nevertheless, stigma and bias associated with recognizing obesity and treating it as a chronic disease remains prevalent. We must work constantly to dispute the outdated and medically incorrect perception that obesity is a lifestyle choice and due to a lack of self-discipline or personal failing. OAC urges the Task Force to recommend coverage of FDA-approved obesity medications under the state’s employee health plan and work toward achieving the same goal for the state’s Medicaid program to ensure that Alabamans struggling with obesity can receive safe and effective treatments for this serious, chronic disease under all public health insurance programs.

We also want to draw your attention to two recent studies showing significant return on investment with appropriate obesity medication use and comprehensive obesity care.

A recent Aon employer focused study captured significant financial and health benefits from ensuring appropriate access to OMs. This research was featured at a recent Milken Institute Global Conference.

- “For those taking OMs, the rate of growth, known as the medical cost trend – was cut roughly in half, the researchers said. There was a 44% reduction in major cardiovascular issues. There was a substantial reduction in osteoporosis. There was a substantial reduction in pneumonia of multiple types.”

Additionally, Milliman recently shared an analysis of the pharmaceutical cost savings obtained by providing comprehensive obesity care in a Connecticut state employee pilot program.

- “Approximately \$430,000 to \$1.2 million (1% to 3% of the total CT state employee OM pharmacy spend in the study period) was avoided based on the rejected claims and by switching eligible program participants to lower net cost therapies appropriate for each member.”

As stated, when referencing the obesity management pilot in the April 2025 Connecticut Healthcare Containment Committee meeting.

- “This is just another example of the progress someone has made in just two months. They have eliminated three medications and will soon eliminate a fourth while losing 24 pounds. Anyone with diabetes or who is overweight should be encouraged to consider this. This is just one testimonial from one of our satisfied clinical members”

A recent analysis of evidence from [31 studies conducted by GlobalData](#) found impressive annual healthcare cost savings from treating obesity. For example, first generation and modern obesity medications saw cost savings range from \$1,220 - \$4,720 in patients with obesity and diabetes with commercial health insurance coverage. Additional savings was found in coverage for metabolic and bariatric surgery. Cost savings were also seen in Medicaid beneficiaries.

Finally, we believe the Task Force must take into consideration the recent announcement by the Trump Administration regarding a new Center for Medicare and Medicaid Innovation (CMMI) demonstration project, which promises to provide access to obesity medications under both Medicare and Medicaid at significantly reduced costs. While details have not been officially announced by CMS, this new demonstration project clearly recognizes that access to OMs -- in the context of comprehensive obesity care -- will be effective at improving health status and reducing near and long-term health care costs. We also believe that these lower medications prices in Medicare and Medicaid will serve as a catalyst for other public and private health plans to provide coverage.

Thank you again for your consideration of this request and please feel free to contact OAC Policy Advisor Chris Gallagher at chris@potomaccurrents.com should you have questions or need additional information.

Sincerely,



Joe Nadglowski
President & CEO