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The Honorable Richard Burr
United States Senate
Washington, DC 20510

The 2,100 members of the Obesity Action Coalition (OAC) from North Carolina applaud you for your co-sponsorship of S.1509, the Treat and Reduce Obesity Act (TROA). We truly appreciate your continuing support for this initiative and other efforts to promote better patient access to, and coverage of, evidence based obesity treatment services

This legislation will provide Medicare beneficiaries and their health care providers with meaningful tools to treat and reduce obesity by improving access to obesity screening and counseling services, and new prescription drugs for chronic weight management. Specifically, the Treat and Reduce Obesity Act gives the Centers for Medicare & Medicaid Services (CMS) the authority to enhance beneficiary access to intensive behavioral counseling services for obesity by allowing additional types of health care providers to offer these services. In addition, the Treat and Reduce Obesity Act allows CMS to provide coverage of prescription drugs under Medicare Part D for chronic weight management to individuals who are affected by obesity.

Evidence-based literature clearly demonstrate that people affected by obesity can substantially improve their health and quality of life when they have access to a continuum of medically necessary treatment – including behavioral, nutritional, pharmaceutical, psychosocial and surgical treatment. Even a 5-10 percent weight-loss produces clinically significant reductions in risk factors for chronic diseases such as diabetes, hypertension, arthritis, heart disease, mental illness, lipid disorders, pulmonary disease (obstructive sleep apnea and restrictive lung disease), and certain cancers.

Similar to many other medical conditions, obesity is a complex, multifactorial chronic disease, requiring a multidisciplinary treatment approach. This approach must encompass the best standards of care, both in terms of the treatments chosen, and the care coordination and clinical environment in which they are delivered. Just as those affected by heart disease receive their care through a coordinated multidisciplinary treatment team, those affected by obesity should also follow a similar continuum of coordinated care. Because of the complex nature of obesity and its variety of impacts on both physical and mental health, effective treatment requires the coordinated services of providers from several disciplines and professions (both physician and non-physician) within both of these treatment areas.

Passage of the Treat and Reduce Obesity Act would be another important step toward ensuring universal access to these critical treatment services. Thank you so much for your support!

Joseph Nadglowski, Jr.
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