



September 27, 2023

Drugs and Therapeutics Advisory Board
Illinois Department of Healthcare and Family Services
201 South Grand Avenue East
Springfield, IL 62763

VIA email – sheri.dolan@illinois.gov

RE: Weight Loss Coverage Policy

Members of the Drugs and Therapeutics Advisory Board:

On behalf of the Obesity Action Coalition (OAC) and the American Diabetes Association® (ADA), we are pleased to provide comments to the Drugs & Therapeutics Advisory Board in line with our organizations' strong support for coverage of comprehensive person-centered obesity care. Specifically, we urge the Illinois Department of Healthcare and Family Services (HFS) to provide coverage for anti-obesity medications (AOMs) for Illinois Medicaid beneficiaries according to current clinical guidelines and Food and Drug Administration approvals. OAC and ADA recommend support for the services and treatments needed to effectively treat and manage the chronic disease of obesity.

The Obesity Action Coalition (OAC) is the largest non-profit in the United States that provides education, support, and advocacy for people living with obesity. OAC is 80,000 members strong and has 3,036 members living in Illinois.

The ADA, the largest non-governmental organization that deals with the treatment and impact of diabetes, represents the 133 million individuals living with diabetes and prediabetes, and has more than 500,000 general members, 15,000 health professional members, and more than one million volunteers.

Obesity is a serious chronic disease that requires treatment and management just like diabetes, cancer, or high blood pressure. Obesity has been recognized as a disease by major medical organizations such as the American Medical Association, American Academy of Family Physicians, American Association of Clinical Endocrinologists, American Heart Association, National Institutes of Health, and the World Health Organization.¹ Nevertheless, we continue to battle stigma associated with obesity, disputing notions that it is a lifestyle choice and the outcome of a lack of self-discipline.

Obesity is a complex, multifactorial, common, serious, relapsing, and costly chronic disease that serves as a major risk factor for developing conditions such as heart disease, stroke, type 2 diabetes, renal disease, non-alcoholic steatohepatitis, and 13 types of cancer (which make up 40 percent of all cancers diagnosed).²

More than 68% of Illinoisans are experiencing overweight (34.5%) or obesity (34.2%).³ Knowing that there is a strong correlation between obesity and diabetes, it is not surprising that more than 4.4 million Illinoisans, or 44% of the adult population have diagnosed diabetes (10.6%) or prediabetes (34%).⁴

We also know that obesity is often the root cause and driver of other health complications. A recent report found that treating obesity can reduce diabetes (-8.9%), hypertension (-2.3%), heart disease (-

2.6%), cancer (-1.3%), and disability (-4.7%) over 10 years in private insurance coverage and Medicare.⁵ The same assumption may be applied to Medicaid programs.

The evidence is clear for HFS to provide access to AOMs. Recent clinical guidelines recommend the comprehensive access to obesity treatment including the use of AOMs, such as the American Diabetes Association's 2023 Standards of Care⁶, the American Gastroenterological Association's obesity management guidelines for adults⁷, and the American Academy of Pediatrics new "Clinical Practice Guideline for the Evaluation and Treatment of Children and Adolescents with Obesity."⁸

In previous correspondence with the ADA, HFS staff have cited the Social Security Act⁹ as the basis of the current state policy to deny coverage for medications when prescribed for weight loss. However, Section (d)(2)(A) merely advises that agents used for weight loss *may* be excluded from coverage (emphasis added). In no way is the state precluded from offering this coverage. In fact, at least 16 state Medicaid programs and 23 state employee health programs offer coverage for weight management drugs.¹⁰

The Obesity Action Coalition has worked tirelessly to improve the world for people with obesity since its founding in 2005. OAC believes that all individuals should be treated with respect regardless of their weight or size, that those affected by the disease of obesity should have access to safe and effective treatment options in the same way that we treat other chronic diseases. Similarly, the American Diabetes Association®, recognizes the strong link between obesity and type 2 diabetes. To help prevent diabetes, we need person-centered access to obesity treatment interventions. ADA strongly supports increasing access to the services and medications health care providers deem necessary for disease prevention and management among their patients.

For questions or requests for additional information, please contact OAC's Director of Policy Strategy & Alliances, Dr. Tracy Zvenyach, PhD, MS, RN, at tzvenyach@obesityaction.org. For ADA, please contact Gary Dougherty, Director of State Government Affairs, at gdougherty@diabetes.org.

Sincerely,



Joe Nadglowski
President and CEO
Obesity Action Coalition



Gary Dougherty
Director, State Government Affairs
American Diabetes Association®

¹ Jastreboff A. et.al. "Obesity as a Disease: The Obesity Society 2018 Position Statement." *Obesity*. Jan 2019 <https://onlinelibrary.wiley.com/doi/10.1002/oby.22378>. Accessed September 14, 2023

² Centers for Disease Control and Prevention. <https://www.cdc.gov/vitalsigns/obesity-cancer/index.html>. Accessed September 14, 2023

³ <https://www.obesityaction.org/wp-content/uploads/Illinois2023.pdf>

⁴ https://diabetes.org/sites/default/files/2023-03/ADV_2023_State_Fact_sheets_all_rev_IL.pdf

⁵ Sexton Ward, A. et.al. "Benefits of Medicare Coverage for Weight Loss Drugs." USC Schaeffer, April 2023.

⁶ American Diabetes Association. <https://healthpolicy.usc.edu/research/benefits-of-medicare-coverage-for-weight-loss-drugs/> Accessed September 14, 2023

⁷ American Diabetes Association. *Diabetes Care* 2022;45(Supplement_1):S113–S124. <https://doi.org/10.2337/dc22-S008>. Accessed September 14, 2023

⁸ American Gastroenterological Association. [https://www.gastrojournal.org/article/S0016-5085\(22\)01026-5/fulltext](https://www.gastrojournal.org/article/S0016-5085(22)01026-5/fulltext). Accessed September 14, 2023

⁹ American Academy of Pediatrics. <https://www.aap.org/en/news-room/news-releases/aap/2023/american-academy-of-pediatrics-issues-its-first-comprehensive-guideline-on-evaluating-treating-children-and-adolescents-with-obesity/>. Accessed September 14, 2023

¹⁰ https://www.ssa.gov/OP_Home/ssact/title19/1927.htm

¹⁰ Jannah, N. et.al. "Coverage for Obesity Prevention and Treatment Services: Analysis of Medicaid and State Employee Health Insurance Programs." *Obesity* Vol 26, No 12, December 2018. <https://onlinelibrary.wiley.com/doi/10.1002/oby.22307> Accessed September 14, 2023