

"Our Mission, Your Voice: Empowering Change Together"

March 18, 2025

Governor Josh Shapiro 501 North 3rd Street 508 Main Capitol Building Harrisburg, PA 17120

Re: Keep Medical Assistance Coverage of GLP-1s for the Treatment of Obesity

Dear Governor Shapiro,

The Obesity Action Coalition (OAC) is the leading national non-profit dedicated to serving people living with the disease of obesity through awareness, support, education, and advocacy. Our vision is to create a society where all individuals are treated with respect and without discrimination or bias regardless of their size or weight. We strive for those affected by the disease of obesity to have the right to access safe and effective treatment options. OAC has a strong and growing membership of more than 85,000 individuals across the United States and 3,908 in Pennsylvania.

We are deeply disappointed at the proposed budget cut to Medical Assistance coverage of GLP-1s for the treatment of obesity included in the following section: "The 2025-26 budget also reduces reliance on high-cost prescriptions that are ballooning the health care system. GLP-1s or Glucagon-like peptide-1 have become blockbuster medications for diabetes and obesity. This drug class is responsible for nearly \$1 billion of Pennsylvania's Medical Assistance budget going into 2025-26. That is why this budget seeks to contain spending by limiting the Medical Assistance coverage of GLP-1s for weight loss except when certain conditions are met."

The table below includes Pennsylvania Medicaid drug utilization data (Q1 and Q2) from 2024. The data shows that GLP-1s for obesity represent roughly 16% of the total GLP-1 class spend. Thus, the cost of obesity medications is not the root of the budget problem and only a small fraction of the overall spend on the class of GLP-1s.



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Pennsylvania Medicaid ¹	Q1 '24	Q2 '24	Q3 '24*	Q4 '24*	Total Obesity
					Reimbursed in 2024
GLP-1 Obesity	\$29,381,283.56	\$36,316,768.36	\$45,032,792.77	\$55,840,663.03	\$166,571,507.72**

^{*} A 24% growth quarter over quarter assumption based on growth Q1 to Q2, ** Total represents gross cost, which does not account for manufacturer rebates, FMAP, or supplemental rebates.

Obesity is a complex chronic disease driven by strong biology, not by personal choice. People living with obesity have a right to FDA-approved medications and should not be subject to sub-standard healthcare. The proposed budget cut is further misguided because treating obesity results in overall health care savings. A recent study of 17,209 adults with a baseline BMI of 30 were estimated to spend 7% less following the loss of 5% of BMI and 30% less following the loss of 25% of BMI.² These findings suggest that treating obesity is associated with lower health care spending. The Pennsylvania Medicaid drug utilization data reflects this trend (not featured in the table), where spending on GLP-1s for diabetes went down 26% from Q1 to Q2.³

We must stop evaluating coverage of obesity care through a cost-only lens. Narrowly cutting coverage for GLP-1s for obesity does not contain spending to address the total cost of the drug class. Further, this approach is rooted in bias and is unethical. The goal of healthcare is not to save money but to improve the health and well-being of people.

¹ Medicaid State Drug Utilization Data 2024, Pennsylvania.

<a href="https://data.medicaid.gov/dataset/61729e5a-7aa8-448c-8903-ba3e0cd0ea3c/data?conditions[0][resource]=t&conditions[0][property]=state&conditions[0][value]=PA&conditions[0][operator]=%3D

² Thorpe KE, Joski PJ. Estimated Reduction in Health Care Spending Associated With Weight Loss in Adults. *JAMA Netw Open.* 2024;7(12):e2449200. doi:10.1001/jamanetworkopen.2024.49200

³ Medicaid State Drug Utilization Data 2024, Pennsylvania.

<a href="https://data.medicaid.gov/dataset/61729e5a-7aa8-448c-8903-ba3e0cd0ea3c/data?conditions[0][resource]=t&conditions[0][property]=state&conditions[0][value]=PA&conditions[0][operator]=%3D



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It is unacceptable to cut coverage of life-saving treatments for people living with one disease over another. OAC appreciates the opportunity to comment on the Pennsylvania Budget in Brief 2025-2026, and strongly urge the state to maintain access to Medical Assistance coverage of GLP-1s for the treatment of obesity. We look forward to working with your administration to share further evidence and the lived experience of people affected by obesity. Please reach out with questions to Chris Gallagher at chris@potomaccurrents.com.

Sincerely,

Joe Nadglowski

President & CEO

Obesity Action Coalition