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**Obesity Action Coalition Statement in Support of SB 445 – a Positive Step Toward Expanding Obesity Care Coverage under New Hampshire State-Regulated Health Plans  
February 10, 2026**

On behalf of the more than 95,000 members of the Obesity Action Coalition (OAC)—including 441 members in New Hampshire—we respectfully express our support for Senate Bill (SB) 455, introduced by Senator Prentiss. OAC is a national nonprofit organization dedicated to giving a voice to individuals affected by the disease of obesity. SB 455 would allow for expanded coverage of FDA-approved obesity medications (OMs) for state-regulated health plans, an important step toward improving access to evidence-based obesity care.

Approximately 380,000 adults in New Hampshire are living with obesity, yet many of these individuals lack access to obesity care coverage.<sup>1</sup> To help address this issue, we urge the Senate Health and Human Services Committee to support passage of this legislation that would provide coverage of GLP-1 medications for state regulated health insurance plans if:

- The covered person's BMI is equal to or greater than 40; or
- The covered person's BMI is equal to or greater than 35, with one or more of the following comorbidities: Type 2 diabetes, High blood pressure or hypertension, Coronary artery disease, Sleep apnea, High cholesterol or hyperlipidemia, Severe osteoarthritis.

OAC supports comprehensive coverage for obesity treatment. This includes access to evidence-based and person-centered interventions, including intensive behavioral and lifestyle treatment, FDA approved obesity medications, and metabolic and bariatric surgery. We support FDA approved medications for the treatment of obesity which are indicated for individuals with a BMI of 30 or greater or a BMI of 27 or greater if they have a related health condition. While the coverage guidelines outlined in SB 455 do not reflect current FDA indications, we believe passage of this legislation would represent a positive incremental step toward improving access to care for thousands in the Granite State.

The financial burden of treating conditions related to obesity also underscores the need for coverage. For example, the associated health care expenses in New Hampshire from obesity are estimated to reach nearly \$2.4 billion annually.<sup>2</sup> However, a number of studies including two recent ones show significant return on investment with appropriate obesity medication use and comprehensive obesity care.

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<sup>1</sup> American Diabetes 2025 Fact Sheet, <https://diabetes.org/sites/default/files/2025-05/the-burden-of-obesity-new-hampshire-05-08-25.pdf>

<sup>2</sup> American Diabetes 2025 Fact Sheet, <https://diabetes.org/sites/default/files/2025-05/the-burden-of-obesity-new-hampshire-05-08-25.pdf>

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

- “For those taking obesity medications, 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”

Clearly, access to FDA-approved obesity medications and comprehensive obesity care is effective at improving health status and reducing near and long-term health care costs. We urge the Senate Health and Human Services Committee to approve SB 455 to help move the state toward these goals.

For more information, please feel free to contact OAC Policy Consultant Chris Gallagher at [chris@potomaccurrents.com](mailto:chris@potomaccurrents.com).