

TALKING POINTS AND TIPS

How to Persuade Your Employer, Human Resources Department, and Employee Health Plan to Provide Comprehensive Obesity Care Coverage, including Anti-Obesity Medications (AOMs)



Identify the Source

Who in the company is responsible for selecting healthcare benefits? Identifying these entities or individuals will allow you to proceed with your request for improved benefits for treatment of obesity.

“Carve-Outs”

Companies may opt-out of including coverage for obesity care without realizing this by choosing a plan with a discriminatory benefit design, one that may intentionally “carve out” obesity treatment, even when medically necessary for adults and children. Further, AOMs can fall under the category of “lifestyle medicine” and many healthcare insurance plan designs by default exclude coverage for AOMs. Urge your company to choose a plan that provides coverage for chronic disease management including obesity care.

Employee Retention

Universal coverage of evidence-based obesity treatments includes AOMs, metabolic and bariatric surgery, and intensive lifestyle interventions.

Costs

Obesity is associated with increased absenteeism, illness, disability, mortality, and use of health care, resulting in lost productivity. Since 42% or greater of employees are likely to have obesity, employers can assist with these issues by treating obesity in a comprehensive, multidisciplinary manner.

Inequities

Federal employees and veterans now have comprehensive obesity care. While a large majority of state employee health plans and Medicaid programs provide coverage for obesity counseling and metabolic and bariatric surgery, many still do not offer coverage for AOMs. If your plan lacks coverage for medications, point out the inequity of these state plans or commercial plans’ non-coverage of these medications. Point out the racial and socio-economic inequities; obesity affects minorities and people with lower incomes the most and these are often the same people who can least afford AOMs.

(may speak to your Diversity, Equity and Inclusion (DEI) Officer, if your company has one)



Identify Influential Advocates

Seek someone with influence, possibly even someone with obesity, to advocate for comprehensive obesity care.

Form Alliances

Find co-workers with obesity to join with you in advocating for coverage. Request a meeting with the person or department responsible for insurance choices.

Metabolic and Bariatric Surgery

Metabolic and bariatric surgery is a proven treatment for obesity, particularly for those with severe obesity. Medications are also an effective and safe treatment avenue for those who may be hesitant about a surgical intervention. Ask why metabolic and bariatric surgery is covered but AOMs are not.

Common responses as to why healthcare plans do not cover AOMs:

Weight Bias

Those making decisions regarding health care coverage may claim that obesity is caused by a lack of willpower and it is therefore the fault of the patient. However, the truth is that obesity is a complex disease. As a disease, much like diabetes or hypertension, pharmacotherapy improves health outcomes more so than a behavioral program alone.

Weight Recurrence

One wouldn't be surprised to see blood pressure go up or blood sugar go up if medication for high blood pressure or diabetes is stopped. Nevertheless, many have stated that AOMs shouldn't be used because people regain the weight when the medications are stopped. It is important to remind naysayers that obesity is a chronic disease, and like other diseases, medications are FDA-Approved for long-term use and continued treatment is required for continued benefit.

Myths

Some may believe AOMs are dangerous. This stems from misinformation in the media, historic problems with older AOMs, and misuse of non-Food and Drug Administration (FDA)-Approved substances. However current AOMs are well-studied and approved by the FDA.

Testimonials

Your own story is the **most powerful and impactful statement** you can make.

