From:
To: ETF SMB Board Feedback

Subject: Request Regarding 2024 Benefits and Insurance Coverage

Date: Thursday, August 24, 2023 8:26:58 AM

Attachments:



Good morning,

I am sending this email to you (per the request of my physician and dietician) prior to our open enrollment period, to request that you please consider the attached letters before making decisions regarding the 2024 State of Wisconsin's Insurance Policies.

If you have any questions for me or can offer any information regarding any possible change to our insurance policies, please let me know.

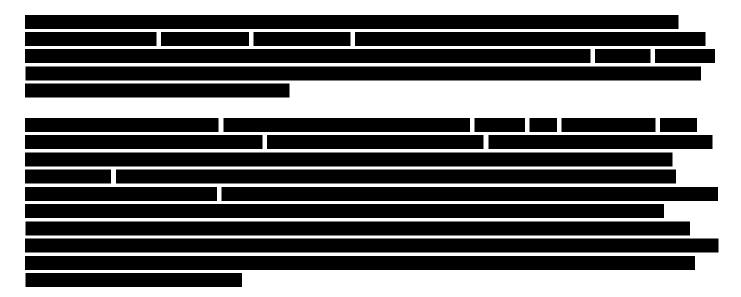
Thank you,





Garrett Sullivan Payroll and Benefits Specialist HQ: 141 NW Barstow St Waukesha, WI

Dear Garrett Sullivan,



It is well recognized that obesity is a chronic illness associated with many related diseases, such as dyslipidemia and hypertension. Healthcare costs are 34% higher for people with obesity, yet healthcare coverage for obesity and weight management is inadequate, insufficient and varies significantly by each health plan. Health outcomes are better for all diseases when treatment options are available, affordable, and accessible. Patients with obesity deserve the same attention and access to FDA-approved treatments as any other chronic illness.

I am writing to request that for 2024 and the future, the State of Wisconsin adjust their insurance policies to include comprehensive treatment for the disease of obesity, <u>specifically to include coverage for FDA-approved anti-obesity medications</u>. I would sincerely appreciate a timely response to this letter. Thank you very much for your time and assistance.

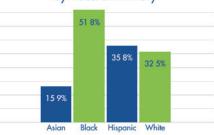
Sincerely,	
Erin Schmitz	

WISCONSIN

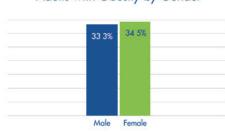
Obesity Fact Sheet



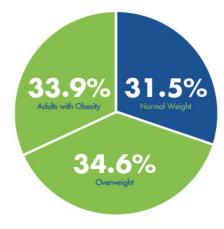
Adults with Obesity by Race & Ethnicity



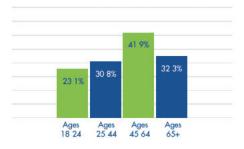
Adults with Obesity by Gender



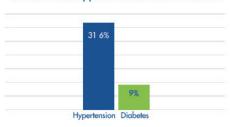
Wisconsin ranks 25th in states impacted by obesity.



Adults with Obesity, Overweight, & Normal Weight Adults with Obesity by Age Group



Adults with Hypertension and Diabetes

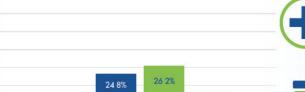


Impacts of Obesity Across the Country

Children 2-19 with Obesity by Race & Ethnicity



The total cost of obesity in the U.S. is \$1.7 Trillion.



Hispanic

Healthcare costs are 34% higher for people with obesity.



Only one state makes weight-based discrimination illegal. Weight bias negatively impacts those affected financially, mentally, socially and physically.

Healthcare coverage for obesity and weight management is inadequate and insufficient, and varies significantly by each health plan.

OAC's Beliefs and Demands

Asian

OAC BELIEVES THAT obesity is a comp ex chronic disease, not a matter of persona choice or mora deficiency.

OAC DEMANDS THAT peop e who are affected by obesity deserve access to affordab e, individua ized medica coverage for science-based treatments in the same way other chronic diseases are managed, and to be treated with the dignity, respect, and equa ity that is offered to their peers.

16 6%

White

Take Action Today!

Black

OAC works to educate the pub ic and key decision makers about weight bias, access to care, and much more! Visit OAC's website today to earn more about how you can be invo ved!

ObesityAction.org

OAC's Action Center provides too s that you can use to take action today!







STATE OF WISCONSIN Department of Employee Trust Funds

A. John Voelker SECRETARY Wisconsin Department of Employee Trust Funds PO Box 7931 Madison WI 53707-7931 1-877-533-5020 (toll free) Fax 608-267-4549 etf.wi.gov

August 28	3, 2023
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Erin Schmitz

Dear Erin Schmitz:

Thank you for your email to the Group Insurance Board (Board) regarding adding coverage of anti-obesity medications to the Group Health Insurance Program (GHIP).

The Board cannot add coverage for benefits unless they are mandated by law, savings can be demonstrated, or other benefits are reduced (see Wis. Stat. § 40.03(6)(c)). The Board reviewed coverage of anti-obesity medications through the pharmacy benefit at the June 30, 2022, meeting. As noted in the Weight-Loss Drug Coverage Options Review memo, the Board's actuary, Segal, estimated the cost of adding weight-loss drugs to the Board's non-Medicare formulary, would be between \$12 million—\$17 million per year, or about \$11,000 to \$13,000 per person. The most recently available studies on these drugs report they are only estimated to save about \$1,400 per person who takes the drug per year. There is currently no legal mandate that these drugs be covered, and the Board has not asked the Department of Employee Trust Funds (ETF) to reduce other benefits in order to cover these drugs.

Another reason the Board is hesitant to add coverage is uncertainty about the long-term effects of these drugs. Anti-obesity medication drug manufacturers have conducted studies of the short-term effects of taking the drugs for up to 72 weeks. However, most research indicates that people will be on anti-obesity medications for multiple years and, in some cases, possibly the rest of their lives. Long-term studies of the drugs aim to answer the questions of whether weight regain may occur over time despite continued therapy, whether maintaining weight loss is viable under the drug, and the good and bad health effects of taking weight-loss drugs for a long duration. The timelines and release dates of the information from these ongoing studies are unknown.

At their November 16, 2022, meeting, the Board received a <u>"Weight Management Analysis"</u> memo and <u>presentation</u> from ETF staff with a comprehensive review of methods to address overweight and obesity, and the available evidence related to treatments. The presentation and memo included information on approaches addressing overweight and obesity ranging from lifestyle and behavioral change services to medical services and anti-obesity drugs.

Erin Schmitz August 28, 2023 Page 2

At the May 17, 2023, Board meeting, the Board discussed adding weight-loss drugs to the drug formulary for 2024 (see pages 9-10 of ETF's memo to the Board linked here: https://etf.wi.gov/boards/groupinsurance/2022/06/30/gib4/direct). The same statutory restrictions still exist, and no additional research has shown greater cost savings; therefore, the Board was not able to add weight-loss drug coverage for 2024.

I continue to monitor peer-reviewed reports, studies, and media reports regarding the pros and cons of anti-obesity medication. With new products coming on the market soon I hope this new competition will assist in driving down the cost of anti-obesity medication. If the cost of anti-obesity medications is lowered, or if greater cost-benefits can be demonstrated, coverage of the medications could become compliant with Wisconsin State Statute and ETF would be able to reintroduce coverage as an option for Board consideration.

GHIP members can obtain some anti-obesity medications at a discounted rate. The drugs on the attached "Department of Employee Trust Funds Discount Drug List" are not covered by the GHIP's pharmacy benefit but can be obtained at the negotiated rate Navitus Health Solutions, the Board's Pharmacy Benefit Manager (PBM), has with the pharmacy filling the drug prescription. The pharmacy-negotiated rate will be lower than the full price of the drug. Please note that the price a member pays will not count towards any out-of-pocket limits (OOPL) or any pharmacy deductible.

Again, thank you for your email and for sharing your weight-loss experience. If you have any other questions, comments, or concerns, please do not hesitate to contact me using the information below.

Sincerely,

Tricia Sieg, Pharmacy Benefits Program Manager Office of Strategic Health Policy Department of Employee Trust Funds tricia.sieg@etf.wi.gov 608-261-6006



Department of Employee Trust Funds Discount Drug List

Updated January 2023

Prescriptions that are not covered by your pharmacy benefit may be available at a discounted rate. This may include drugs for infertility, weight loss, cosmetic or other lifestyle needs as prescribed by your doctor. You can use your Health Care Flexible Spending account to pay for them, with a prescription.

DRUG	Copay	Drug Category
ADIPEX-P CAP	100%	WEIGHT LOSS
ADIPEX-P TAB	100%	WEIGHT LOSS
AVAGE CREAM	100%	COSMETICS
CAVERJECT INJ	100%	INJECTABLES, SEXUAL DYSFUNCTION
cetrorelix acetate for inj kit	100%	INFERTILITY, INJECTABLES
CETROTIDE INJ KIT	100%	INFERTILITY, INJECTABLES
CHROMELIN SOLN	100%	COSMETICS
CLOMID TAB, CLOMIPHENE CITRATE TAB	100%	INFERTILITY
CLOMIPHENE CITRATE POWDER	100%	INFERTILITY
CONTRAVE TAB	100%	WEIGHT LOSS
DY-O-DERM SOLN	100%	COSMETICS
EDEX INJ	100%	INJECTABLES, SEXUAL DYSFUNCTION
finasteride tab	100%	COSMETICS
FOLLISTIM AQ INJ	100%	INFERTILITY, INJECTABLES
ganirelix ac inj	100%	INFERTILITY, INJECTABLES
GONAL-F RFF INJ	100%	INFERTILITY, INJECTABLES
hydroquinone cream	100%	COSMETICS
leuprolide inj	100%	INFERTILITY, INJECTABLES
LUPRON DEPOT INJ	100%	INJECTABLES
LUSTRA CREAM	100%	COSMETICS
MENOPUR INJ	100%	INFERTILITY, INJECTABLES
METHOXSALEN POWDER	100%	COSMETICS
minoxidil soln	100%	COSMETICS
MUSE SUPP	100%	SEXUAL DYSFUNCTION
OVIDREL INJ	100%	INFERTILITY, INJECTABLES
PAPAVERINE/ALPROSTADIL INJ	100%	INJECTABLES, SEXUAL DYSFUNCTION
PAPAVERINE/PHENTOLAMINE INJ	100%	INJECTABLES, SEXUAL DYSFUNCTION
PAPAVERINE/PHENTOLAMINE/ALPROSTADIL INJ	100%	INJECTABLES, SEXUAL DYSFUNCTION
phentermine cap	100%	WEIGHT LOSS
phentermine tab	100%	WEIGHT LOSS
PHENTOLAMINE/ALPROSTADIL INJ	100%	INJECTABLES, SEXUAL DYSFUNCTION
PREGNYL INJ	100%	INFERTILITY



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