

From: [Houdek, Tiffany M](#)
To: [ETF SMB Board Feedback](#)
Subject: Weight loss benefit for state employees
Date: Wednesday, January 17, 2024 7:02:46 AM

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Dear Group Insurance Board,

My name is Tiffany Houdek and for the past 20 years, I've served as a physical therapist at the UW School of Medicine and Public Health, within the Department of Orthopedics and Rehabilitation. I've treated tens of thousands of patients during my career, including many state employees and members of their families. A significant and growing portion of these individuals have faced the challenges associated with obesity-related conditions and I can assuredly report that the obesity epidemic in Wisconsin is worsening with every passing year.

I understand that in the following months, the board will be deciding whether to extend coverage for anti-obesity medicines for GHIP sponsored health plans and I want to be on the record stating that I strongly support this action from a public health and economic perspective.

Here are some crucial points, from my unique perspective as a physical therapist:

Obesity's Impact on Therapy Success: Obesity often presents a significant barrier to the success of physical therapy interventions. The added stress on joints and muscles due to increased body weight can hinder patients' ability to perform exercises effectively, impacting their progress and recovery.

Recovery and Injury Prevention: Obesity is closely linked to musculoskeletal injuries and prolonged recovery times. It can exacerbate chronic pain conditions and limit patients' capacity to regain mobility. Weight-loss medications can play a vital role in reducing the impact of obesity on injury prevention and recovery.

Improved Mobility and Functionality: Many of the individuals I work with face mobility challenges due to obesity-related issues. Weight-loss medications can be a valuable tool in enhancing mobility and functionality, allowing patients to lead more active and fulfilling lives.

Personal Connection: Beyond my professional experience, I have friends and loved ones who have suffered from obesity-related conditions. Witnessing their struggles has reinforced my belief in the importance of addressing this issue comprehensively.

I firmly believe that by incorporating weight-loss medications into GHIP health plans, we can provide a holistic approach to addressing the complex and multifaceted problem of obesity. This approach acknowledges the diverse needs of our state employees and their families, and recognizes that there is no one-size-fits-all solution to this issue. Moreover, I recently read that nearly all of Wisconsin's Midwest

neighboring states and the federal government's employee health plans already cover AOMs. Wisconsin therefore risks falling behind from a workforce benefits and public health leader perspective which would be a big shame if not rectified soon.

There are also important considerations from a population wide cost perspective...by leveraging the latest AOMs as a covered treatment option, we will be taking a major step forward in addressing the long term and often catastrophic financial consequences of inadequately treated obesity and the many chronic and difficult to treat comorbidities such as Type 2 diabetes, many types of cancers, heart and pulmonary failure, spinal dysfunction, depression, among many other serious conditions. While all treatments require investment, the cost of medications tend to go down over time therefore the board would be wise to take a long-term view of both public health and cost containment.

Your consideration of this matter is not only a significant step toward improving the lives of public employees and retirees in Wisconsin but also a recognition of the broader impact of obesity on our community's health and well-being. I am grateful for your dedication to modernizing GHIP to better serve the evolving healthcare needs of our state.

Thank you for your time and attention.

Sincerely,
Tiffany Houdek

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January 26, 2024

Tiffany Houdek
THoudek@uwhealth.org

Dear Tiffany Houdek:

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

The Board will consider 2025 GHIP changes at its February 21, 2024, meeting. The agenda, memos, and presentations for that meeting will be posted on the Department of Employee Trust Funds' (ETF's) ["Group Insurance Board Meeting Agendas and Materials"](#) webpage about a week prior to the meeting.

While ETF staff continues to monitor cost-effectiveness research, the current pricing of these drugs is still greater than the measurable savings. The Board must still adhere to [Wis. Stat. § 40.03\(6\)\(c\)](#) that only allows the Board to add benefits to the GHIP if the addition is mandated by law or if a savings can be demonstrated. If neither of these provisions are met, the Board must reduce benefits to allow for the addition of new benefits.

Recent market data has suggested that AOMs account for 1% of annual premium increases for 2024. The Board would either need to reduce \$18M in benefits to accommodate this cost increase, greater savings values would need to be shown in literature, or pharmaceutical companies would need to reduce prices to bring the costs in line with the demonstrated benefits.

Again, thank you for your email. 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

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