

From: [Poddar, Kavita H](#)
To: [ETF SMB Board Feedback](#)
Subject: covering anti-obesity medicines
Date: Friday, February 2, 2024 7:30:30 AM

**CAUTION: This email originated from outside the organization.
Do not click links or open attachments unless you recognize the sender and know the content is safe.**

Dear ETF/ Group Health Insurance Board,

My name is Dr. Kavita Poddar, a clinical nutritionist at UW Health, with a significant background in diabetes, obesity care, and nutrition planning. I've worked at UW for over 10 years and I also serve as an Adjunct Professor at UW-Milwaukee's Department of Biomedical Sciences. My extensive training in health promotion and disease prevention emphasizes lifestyle changes, including dietary modifications for those affected by Obesity, diabetes and other Chronic conditions. I have witnessed the huge multifaceted challenges and opportunities in managing obesity.

Obesity is not just a personal health issue but a burgeoning public health crisis that demands a comprehensive, multi-disciplinary approach. As we navigate through the complexities of obesity and its associated health risks, it becomes evident that untreated obesity is not only dangerous but also exorbitantly expensive for individuals and our healthcare system. The inclusion of FDA-approved, effective anti-obesity medications in the state employee health plan is a crucial step towards a more holistic obesity treatment paradigm. These medications should be part of a comprehensive strategy that includes nutritional counseling, physical activity, and psychological support, tailored to each patient's unique needs and abilities. The reality is even with the best diet and exercise programs, many patients are unable to lose weight and keep it off, leading to the myriad of debilitating and expensive to treat conditions.

Our current healthcare landscape underscores the necessity of viewing obesity through the lens of a public health crisis, not individual personal failings, lack of willpower or laziness. By doing so, we can identify and implement strategies to improve population-level health outcomes. Incorporating anti-obesity medications into our treatment arsenal is aligned with this perspective, offering an evidence-based intervention that can significantly impact patients meeting the criteria for their use and drastically improving quality of life.

The escalating costs associated with managing obesity-related comorbidities highlight the urgent need to bend the cost curve downwards over the coming decades. A proactive stance on obesity management, including the provision of anti-obesity medications, can lead to substantial long-term savings by preventing the progression of obesity-related diseases and reducing the need for more invasive and costly interventions.

Moreover, aligning our state employee health benefits with those offered by our Midwest neighboring states is paramount to remaining competitive and attracting top talent, including

teachers, law enforcement, academics, researchers, health care providers, among others. Many states and the federal government have already recognized the value of providing comprehensive obesity treatment options, including medication, as part of their health benefits. By doing the same, we not only enhance the health and well-being of our employees but also position our state as a leader in progressive, employee-centered healthcare benefits.

In conclusion, the fight against obesity requires a unified, comprehensive approach that transcends traditional treatment modalities. As a clinical nutritionist deeply involved in this field, I urge the Group Health Insurance Board to consider the inclusion of anti-obesity medications as part of our health plan. Such a decision would mark a significant step forward in addressing the obesity epidemic, improving the health of our population, and ensuring the sustainability of our healthcare system.

I appreciate your time and consideration of this vital issue and am available for further discussion or to provide additional information as needed.

Sincerely,
Dr. Kavita Poddar, PhD, RD
Clinical Nutritionist
UW Health



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

February 6, 2024

Dr. Kavita Poddar, PhD, RD
KPoddar@uwhealth.org

Dear Dr. Kavita Poddar:

Thank you for your email to the Group Insurance Board (Board) regarding covering anti-obesity medications.

The Board will consider 2025 Group Health Insurance Program (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 weight loss medications 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
Department of Employee Trust Funds
tricia.sieg@etf.wi.gov

Kavita Poddar
February 6, 2024
Page 2

608-261-6006