

From: [REDACTED]
To: [ETF SMB Board Feedback](#)
Subject: Reimbursing anti obesity medications
Date: Tuesday, February 6, 2024 9:04:27 AM

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Dear ETF/Group Health Insurance Board:

I've worked for UW Health for 8 years, as a Medical Assistant at the UW Pain Management Clinic and most recently as a Registered Nurse within the UW Cardiovascular Intensive Care Unit where I work closely with some of the most serious and complex cases. I am writing today to strongly encourage GHIB to add coverage for anti obesity medicines (AOMs) to the covered formulary .

Based on my years of training and practice with thousands of patients, I can state confidently that obesity is the most pervasive commonality in patients with serious cardiac, pulmonary, orthopedic, chronic pain and mobility conditions and it exacerbates complications and often limits treatment options and quality of life. As I witness on a nearly day to day basis, untreated obesity can and often does lead to premature death, disability/inability to work and related mental health and intimacy challenges.

Wisconsin and the entire nation is in the midst of an obesity epidemic which seems to be getting worse every year. There is no one size fits all solution and every patient situation is unique, but I feel strongly that the tens of thousands of state employees should have as many safe, FDA approved and effective treatment options including AOMs when taken in consultation with their healthcare provider. I am also aware that many of our neighboring Midwestern states like Iowa, Illinois, Minnesota, Indiana already provide coverage for AOMs as do the federal employee health plans. I can't think of any reason why Wisconsin should not follow suit from both a public health, workforce competitiveness and equity standpoint.

Unmanaged obesity also costs billions and billions of dollars of dollars of government funds. Anything we can do to identify opportunities to lower costs in the coming decades will benefit not just state employees, but all Wisconsin residents because the state would be able to allocate those funds to other programs to promote healthy living, such as parks, recreation programs, and healthier food in schools.

On a day to day basis, I witness the negative impact of obesity on patients and families, and we need to be more proactive in identifying potential tools to lessen the burden. AOMs are likely to be a valuable tool to so many, they are FDA approved and can help avoid much more serious complications. I believe many of my colleagues and other state employees we treat will live better, healthier and more productive lives if this board takes action.

Thank you for your time and consideration, I look forward to hearing from you soon..

Sincerely,
Emily Dolan, ADN, RN

UW Health Cardiovascular and Cardio thoracic Intensive Care Unit (CVCT ICU)





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February 7, 2024

Emily Dolan, ADN, RN
[REDACTED]

Dear Emily Dolan:

Thank you for your email to the Group Insurance Board (Board) regarding adding coverage of anti-obesity medications (AOMs) to the state employee health plans known as 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 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

Emily Dolan
February 7, 2024
Page 2

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