

From: [Ben Brockman](#)
To: [ETF SMB Board Feedback](#)
Subject: Public Comment for August 14 Board Meeting
Date: Monday, August 5, 2024 8:40:53 AM
Attachments: [Wisconsin ETF RFI Response_Final.pdf](#)

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Hello,

Please find our response to the request for Board Correspondence attached.

Thank you,

Ben Brockman

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Department of Employee Trust Funds
Board Liaison
Madison WI 53707-7931

RE: State of Wisconsin Department of Employee Trust Funds: Obesity Medications

Eli Lilly and Company (Lilly) appreciates the importance of access to comprehensive and evidence-based care for people with obesity including coverage of FDA-approved obesity medications. Lilly commends the State of Wisconsin Department of Employee Trust Funds (ETF) for considering providing coverage for these important treatments. People with obesity, and their healthcare professionals, seek effective FDA-approved obesity treatments and providing access to these treatments along with comprehensive obesity care supports your state employees in their journey for better health and productivity. When access is denied for safe and effective FDA-approved treatments, people with obesity may be left untreated which can significantly impact their long-term health and increase their risk for premature mortality.

Obesity may also put individuals at an increased risk for numerous complications. A systematic review and evaluation of current evidence have identified 224 obesity-associated comorbidities, including Type 2 diabetes, coronary heart disease, hypertension, depression, and dyslipidemia.ⁱ These health issues not only impact people living with the obesity, but also have wider societal implications, including effects on workforce productivity. Real-world analysis shows that obesity is associated with more indirect costs due to higher rates of disability events, increased workers' compensation claims, and more workplace absence hours compared to those with a normal body mass index (BMI).ⁱⁱ Furthermore, the financial impact of obesity is substantial. A diagnosis of obesity or overweight correlates with 2.7 times greater annual healthcare spending compared to adults without an obesity or overweight diagnosis.ⁱⁱⁱ

Obesity exacts a severe financial toll on the State of Wisconsin. Already, obesity is estimated to reduce economic activity in Wisconsin by \$8.5 billion statewide, according to an in-depth review by analytics and consulting company GlobalData. This includes steep impacts on healthcare budgets, with Wisconsin employers shouldering an extra \$1.2 billion in higher employer healthcare costs, \$2.3 billion in health-related lost workdays and disability, and \$589 million in

increased spending on Medicaid, public employee health plan coverage premiums, and public assistance program costs.^{iv}

The obesity treatment landscape continues to rapidly evolve, and we encourage the ETF to explore the various coverage options now available through its pharmacy benefit manager (PBM). Lilly remains committed to expanding access and continues to explore different approaches with PBMs, health plans, and employers. But we cannot expand access alone. As a serious, chronic disease, access to innovative obesity treatments should be on par with other chronic diseases. We are happy to meet with leaders at the State of Wisconsin ETF to discuss options to ensure affordable coverage for patients.

ⁱ Yuen MMA. *Gastroenterol Clin North Am.* 2023;52(2):363-380.

Study design: Two sets of literature searches were used/conducted to identify comorbidities (and/or complications) associated with obesity. The initial search included the terms: “Comorbidity[MESH] and Obesity[MESH]” restricted to humans, English language, and adults over 19 years old. The initial search was then replicated with the exception that “Comorbidity[MESH]” was replaced with each of the 198 comorbidities identified in the initial search, resulting in 2037 articles included in the assessment. The study demonstrates association between obesity and complications, not causality.

ⁱⁱ Shinde S, et al. Poster presented at: ENDO 2023; June 15-18, 2023; Chicago, Illinois.

ⁱⁱⁱ Telesford I, et al. Peterson-KFF Health System Tracker. Accessed June 17, 2023.

Study design: From an analysis of claims for the years 2011 through 2021 from Merative MarketScan® Commercial Databases, which include insurance plans from large employers (representative of firms with ≥1000 workers). The database contains claims for over 13 million of the 85 million people within the large group market. Weights were applied to make the data representative of large group plans. The study included adults <65 years old with at least 6 months of continuous enrollment. Annual spending, inpatient admission costs, and prescription costs were included if they were between \$0 and the 99.5th percentile of cost (to exclude outliers). Total spending includes amounts paid by the insurer and the enrollee.

^{iv} Fact Sheet: Obesity’s Impact on Wisconsin’s Economy and Workforce in 2023, GlobalData (last accessed July 11, 2024), <https://www.globaldata.com/health-economics/US/Wisconsin/Obesity-Impact-on-Wisconsin-Factsheet.pdf>.