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Correspondence Memorandum

Date: May 7, 2025
To: Group Insurance Board
From: Tricia Sieg, Pharmacy Benefit Programs Manager
Office of Strategic Health Policy
Subject: 2026 Final Benefit Changes Follow-Up Information

This memo is for informational purposes only. No Board action is required.

During the March 12, 2025, Group Insurance Board (Board) meeting, while discussing the 2026 Final Benefits and Contract Changes ([Ref. GIB | 03.12.25 | 3B, pages 7-8](#)), the Board was informed that the Centers for Medicare & Medicaid Services (CMS) had proposed a new rule for 2026. This proposed rule would reinterpret existing statute so that anti-obesity medications (AOMs), used to treat obesity, would no longer be excluded from Medicare Part D formularies.

Segal, the Board's actuary, evaluated the potential impact of adding AOMs to the Board's Employer Group Waiver Plan (EGWP) and estimated the annual cost would range between \$4.2 million and \$5.4 million, depending on the prior authorization requirements.

ETF informed the Board at the March meeting that a final decision was expected in April from CMS.

On April 4, 2025, CMS announced that Medicare Part D formularies will not be required to cover AOMs in 2026. A CMS spokesperson stated that expanding coverage of AOMs "is not appropriate at this time" and that CMS "may reconsider the policy after more review of the drugs' potential benefits and relevant costs."¹

Staff will be at the Board meeting to answer any questions.

¹ Wilde Mathews, Anna. Essley Whyte, Liz. "Trump Administration Rejects Expanding Medicare, Medicaid Coverage of Obesity Drugs" April 4, 2025. The Wall Street Journal. https://www.wsj.com/health/healthcare/trump-administration-rejects-expanding-medicare-medicaid-coverage-of-obesity-drugs-f32ced38?st=RnhzsN&reflink=desktopwebshare_permalink

Reviewed and approved by Renee Walk, Director, Office of Strategic Health Policy
Electronically Signed 04/28/2025

Board	Mtg Date	Item #
GIB	05.21.25	13N