



September 15, 2023

WASHINGTON, DC – The Obesity Care Advocacy Network (OCAN) applauds the House Energy and Commerce Health Subcommittee for including HR 4818, the Treat and Reduce Obesity Act (TROA), as part of the upcoming September 19th hearing on “Examining Policies to Improve Seniors’ Access to Innovative Drugs, Medical Devices, and Technology.” The purpose of the hearing is to examine ways that improve older adults’ access to life-saving health care. Unfortunately, access to obesity treatment and care is limited for Medicare beneficiaries and we are pleased that the Committee has chosen to discuss TROA during this hearing. The passage and enactment of TROA would be an important step toward achieving the hearing’s goal.

TROA is legislation designed to effectively treat and reduce obesity in older Americans by enhancing Medicare beneficiaries’ access to healthcare providers that are best suited to administer intensive behavioral therapy (IBT) and by allowing Medicare Part D to cover Food and Drug Administration (FDA)-approved anti-obesity medications (AOMs).

The obesity epidemic has damaged our nation’s health. Among older adults (aged 60+), the prevalence of obesity is 42.8%, similar to the level among younger and middle-aged adults. The prevalence of severe obesity among those aged 60+ is 5.8%. More than 20% of the population will be 65 years of age or older by 2030, up from 15% today, highlighting the importance of addressing obesity among older Americans. Congress must take steps to address this crisis now.

Currently, intensive behavioral therapy is restricted by the types of healthcare providers that can deliver services (only primary care physicians, nurse practitioners, and physician assistants) and it also limits the settings of care to primary care clinics. These restrictions leave many qualified specialty providers, like registered dietitians, clinical psychologists, and specialty physicians, as well as those community-based organizations providing evidence-based health interventions, unable to deliver this important lifestyle intervention.

Unfortunately, Medicare beneficiaries do not have access to all evidence-based treatments for obesity, such as AOMs. When Medicare Part D was passed in 2003, it included language that restricted coverage of “weight loss” medications. Medicare wrongly interpreted this restriction as a full exclusion. Because of this error, today Medicare Part D continues to preclude older Americans, and a number of dual eligible beneficiaries, from receiving updated, safe, and effective clinical standards of care reflecting FDA-approved pharmacotherapy to treat obesity.

The [members of OCAN](#) support and endorse the Treat and Reduce Obesity Act. Obesity is the number two cause of preventable death in the United States and it is critical that Congress pass this important legislation to improve and save patient’s lives—now and into the future.

Obesity Care Advocacy Network Members

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National Hispanic Medical Association	National Kidney Foundation
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About OCAN

The Obesity Care Advocacy Network (OCAN) is a diverse group of organizations that have come together with the purpose of changing how we perceive and approach the problem of obesity in this nation. The mission of the coalition is to unite and align key obesity stakeholders and the larger obesity community around key obesity-related education, policy, and legislative efforts in order to elevate obesity on the national agenda. For more information, visit <https://obesitycareadvocacynetwork.com/>