

THE TREAT and REDUCE OBESITY ACT

Medicare patients deserve access to obesity care and life-saving treatments!

H.R.4818/S.2407, the Treat and Reduce Obesity Act (TROA) was reintroduced in the 118th Congress by Senators Tom Carper (D-DE) and Bill Cassidy (R-LA) and Representatives Brad Wenstrup (R-OH), Raul Ruiz (D-CA), Mariannette Miller-Meeks (R-IA), and Gwen Moore (D-WI).

TROA is bipartisan legislation that provides Medicare beneficiaries with access to safe, effective, and life-saving treatments. The bill aims to effectively treat and reduce obesity in older Americans by enhancing Medicare beneficiaries' access to healthcare providers that are best suited to provide intensive behavioral therapy (IBT) and by allowing Medicare Part D to cover Food & Drug Administration (FDA)-approved anti-obesity medications (AOMs).

Facts: Obesity in Older Adults:

- About 42.8 percent of adults aged 60 and over had obesity in 2018.¹
- Obesity increases the risk for over 224 medical conditions, including: High blood pressure, heart disease, certain cancers, arthritis, lipid disorders, sleep apnea and type 2 diabetes.²
- As of June 2023, around 65.7 million Americans are enrolled in Medicare.³
- Broader Medicare coverage of obesity treatment would save federal taxpayers as much as \$245 billion in the first 10 years of coverage alone, if private insurers were to follow Medicare's lead.⁴
- The cumulative social benefits from Medicare coverage for new obesity treatments over the next 10 years would reach almost \$1 trillion, or roughly \$100 billion per year.⁵
- New clinical trial data shows that people reduce their risk of major adverse cardiovascular events, like heart attack and stroke, by 20% when taking one of the new AOMs.⁶

Medicare Part D is Lagging Behind the Latest Scientific Evidence:

Life-saving treatments should be covered. Since Medicare Part D was passed into law, significant medical advances have been made and the FDA has approved several new obesity medications, with more on the way. One of the newly approved AOMs is now being viewed as life-saving based on top-line results from a clinical trial that is showing a 20% reduction in an individuals' chance of adverse

¹ Hales CM, Carroll MD, Fryar CD, Ogden CL. <u>Prevalence of obesity and severe obesity among adults: United States, 2017–2018. NCHS Data Brief</u>, no 360. Hyattsville, MD: National Center for Health Statistics. 2020.

² Michele M.A. Yuen, Health Complications of Obesity: 224 Obesity-Associated Comorbidities from a Mechanistic Perspective, Gastroenterology Clinics of North America, Volume 52, Issue 2, 2023, Pages 363-380,https://doi.org/10.1016/j.gtc.2023.03.006.

³ A Snapshot of Sources of Coverage Among Medicare Beneficiaries, Kaiser Family Foundation, Aug 14, 2023

⁴ Benefits of Medicare Coverage for Weight Loss Drugs, 2023. The Schaeffer Center White Paper Series is published by the Leonard D. Schaeffer Center for Health Policy & Economics at the University of Southern California.

⁶ Company Announcement. Novo Nordisk A/S: Semaglutide 2.4 mg reduces the risk of major adverse cardiovascular events by 20% in adults with overweight or obesity in the SELECT trial.

cardiovascular events such as heart attack and stroke. Finally, seniors who do have coverage for AOMs will lose access to these treatments upon entering Medicare at age 65.

Intensive Behavioral Therapy and Nutrition Counseling Coverage is restricted:

The Centers for Medicare & Medicaid Services (CMS) currently limits coverage for IBT to only when these services are provided by a primary care provider in the primary care setting. Because of CMS's narrow coverage decision, registered dietitian nutritionists (RDNs), community providers, obesity medicine specialists, endocrinologists, bariatric surgeons, psychiatrists, clinical psychologists and other specialists are prevented from effectively providing services to Medicare beneficiaries.

Medicare patients deserve access to obesity care and life-saving treatments!

TAKE ACTION!

For more information or to co-sponsor the Treat and Reduce Obesity Act, please contact:

In the House of Representatives,

Kelsi Wilson with Representative Brad Wenstrup (R-OH) at Kelsi.Wilson@mail.house.gov

In the Senate:

Victoria Carle with Senator Tom Carper (D-DE) at <u>Victoria_Carle@carper.senate.gov</u>

Organizations Supporting the Treat and Reduce Obesity Act:

Academy of Nutrition and Dietetics • American Academy of PAs • American College of Occupational and Environmental Medicine • American Diabetes Association • American Gastroenterological Association • American Psychological Association • American Society for Metabolic and Bariatric Surgery • American Society for Nutrition • Association of Diabetes Care & Education Specialists • Boehringer Ingelheim • ConscienHealth • Currax • Diabetes Leadership Council • Diabetes Patient Advocacy Coalition • Eli Lilly • Endocrine Society • Gerontological Society of America • Global Liver Institute • HealthyWomen • Intuitive Surgical • National Consumers League • National Council on Aging • National Hispanic Medical Association • National Kidney Foundation • Novo Nordisk • Obesity Action Coalition • Obesity Medicine Association • Ro • STOP Obesity Alliance • The Obesity Society • WW International • YMCA of the USA