



THE TREAT and REDUCE OBESITY ACT

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

H.R.4231/S.1973, the Treat and Reduce Obesity Act (TROA) was reintroduced in the 119th Congress by Senators Bill Cassidy (R-LA) and Ben Ray Lujan (D-NM), and Representatives Mike Kelly (R-PA), Raul Ruiz (D-CA), Marianne 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 obesity medications.

Facts about Obesity in Older Adults:

- About 41 percent of adults aged 60 and over had obesity from 2015-2016.¹
- 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 May 2025, around 68.9 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, 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 obesity medications.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 obesity medications is now being viewed as lifesaving based on top-line results from a clinical trial that is showing a 20% reduction in an individuals' chance of adverse cardiovascular events such as heart attack and stroke. Finally, seniors who do have

¹ Hales CM, Carroll MD, Fryar CD, Ogden CL. [Prevalence of obesity among adults and youth: United States, 2015–2016](#). NCHS data brief, no 288. Hyattsville, MD: National Center for Health Statistics. 2017.

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 [Medicare Monthly Enrollment](#). Data.CMS.Gov. Accessed on September 11, 2025.

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.

⁵ Id.

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.

coverage for obesity medications 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.

TAKE ACTION!

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

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Organizations Supporting the Treat and Reduce Obesity Act:

Academy of Nutrition and Dietetics • Alliance for Patient Access • Alliance of Sleep Apnea Partners • American Academy of PAs • American Association of Clinical Endocrinology • American College of Occupational and Environmental Medicine • American Diabetes Association • American Gastroenterological Association • American Kidney Fund • American Medical Women's Association • American Psychological Association • American Society for Metabolic and Bariatric Surgery • American Society for Nutrition • Amgen • Association of Diabetes Care & Education Specialists • Alliance for Women's Health and Prevention • Boehringer Ingelheim • ConscienHealth • Currax • Diabetes Leadership Council • Diabetes Patient Advocacy Coalition • Eli Lilly • Endocrine Society • Gerontological Society of America • Global Liver Institute • HealthyWomen • National Consumers League • National Council on Aging • National Hispanic Medical Association • National Kidney Foundation • National Psoriasis Foundation • Novo Nordisk • Obesity Action Coalition • Obesity Medicine Association • Pfizer • Society for Women's Health Research • STOP Obesity Alliance • The Obesity Society • YMCA of the USA