



## Reminders...

- Lines are muted...
- Prepared remarks from our panelists will be about 20 minutes
- After prepared remarks our attendees will have the opportunity to ask questions.
- To ask a question please digitally raise you hand using the Zoom feature and wait to be unmuted.
- Our panelists will respond to as many questions as possible until we are out of time.

# Open Forum: Weight Management

December 19, 2024

3:30 – 4:30 PM

**This session is being recorded. By participating, attendees are consenting to being recorded.**

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# Agenda

- **Welcome and Introductions**
  - ❖ *Jim Fregelette, Trust Chair*
  - ❖ *Donna Walters, Trust Vice Chair*
- **Trust Decision to End Coverage for Weight Loss Drugs**
  - ❖ *Jim Fregelette, NY44 Trust Chair*
  - ❖ *Donna Walters, NY44 Trust Vice Chair*
  - ❖ *Medhat Kaldas, Oswald*
- **Introduction of Weight Watchers Program**
  - ❖ *Gretchen Heil, Oswald*
  - ❖ *Christa McHale, NY44 Trustee*
- **Review of Brook+ Program**
  - ❖ *Stacey Porter, NY44 Trust Benefits Specialist*
  - ❖ *Sally King, NY44 Trust Member*
- **Questions and Answers**
  - ❖ *Panel*

# Trust Decision to End Coverage for Weight Loss Drugs

## Plan Design

- The Trust previously excluded weight loss drugs but considered coverage only upon the recommendation of Capital Rx and only with a diagnosis of **morbid obesity**
  - Morbid Obesity = a Body Mass Index (BMI) of 40 or higher is generally considered morbidly/severely obese; roughly equivalent to being 100 pounds or more overweight for men and 80 pounds or more for women
- Capital Rx cannot, and has never applied the Trust's morbid obesity criteria
- Capital Rx has applied its own less restrictive criteria since July 2021
  - Capital Rx has reported only approx. 40% of current utilizers have a diagnosis and associated BMI of morbid obesity; approx. 60% have less than a morbid obesity diagnosis and BMI (approx. 6% of those have only a diagnosis and associated BMI for being just overweight)
- Capital Rx advised that many physicians prescribe the drugs well beyond the member reaching his/her weight loss goal – many members are expected to stay on these medications for life – even if the member has attained normal weight and associated BMI



# Trust Decision to End Coverage for Weight Loss Drugs

## Utilization

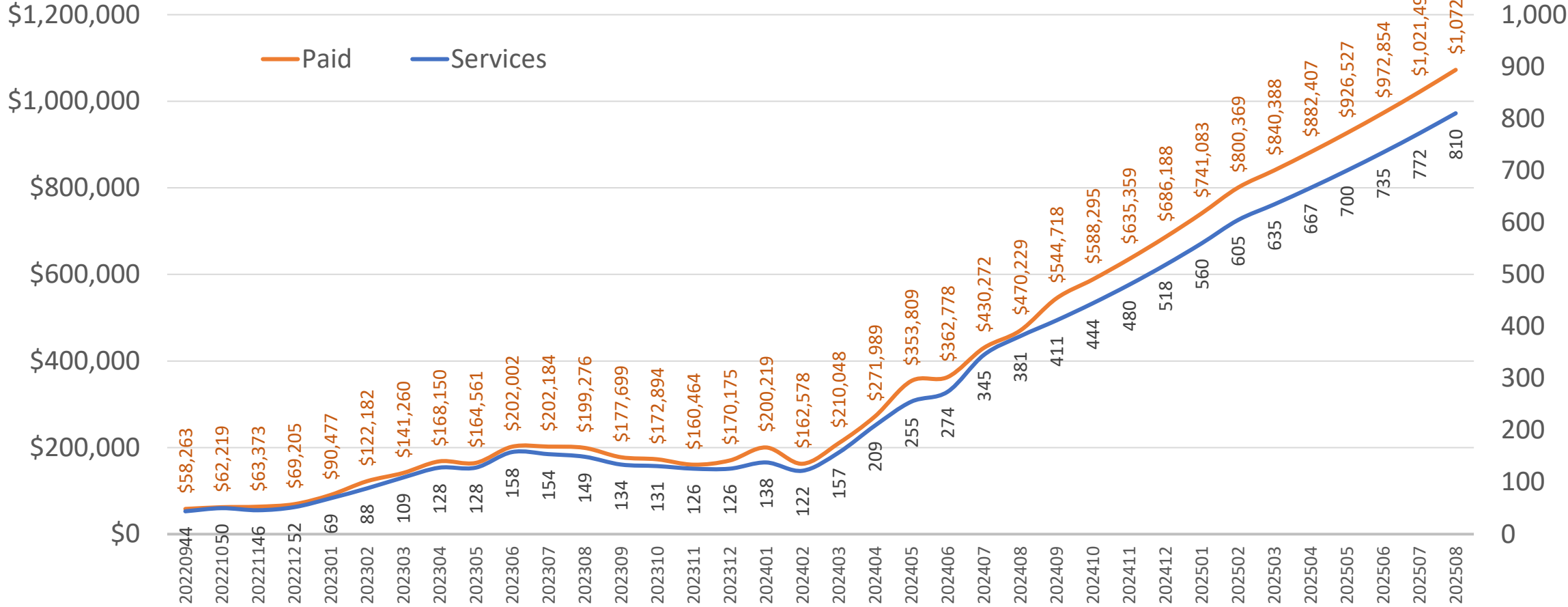
- From 7/1/22 – 6/30/23 weight loss drug (Wegovy, Saxenda, Contrave, Qsymia, Phentermine HCl, Zepbound) utilization equaled:
  - 983 Claims
  - 234 Users
  - \$1,253,906 Claims cost
  - \$7.24 PMPM
- From 7/1/23 – 6/30/24, weight loss drug (Wegovy, Saxenda, Contrave, Qsymia, Phentermine HCl, Zepbound) utilization equaled:
  - 1,995 Claims
  - 392 Users
  - \$2,647,864 Claims cost
  - \$15.09 PMPM

## Concerning Trends

- Significant increases realized in one year
  - approx. 103% increase in claims
  - approx. 68% increase in users
  - approx. 111% increase in claims cost
  - approx. 108% increase in PMPM
- In the most recent quarter, the average script count jumped from 209 per month to 363 per month
- Utilization and cost trends would have impacted Trust contribution rates significantly

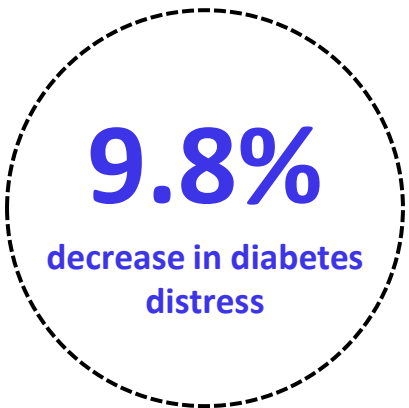
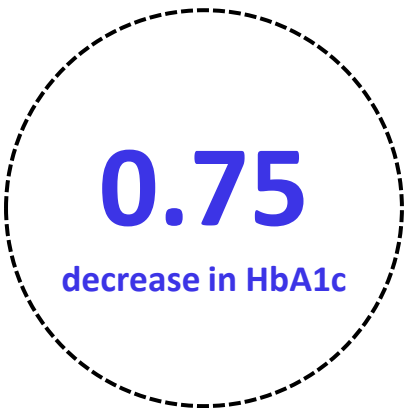
# Trust Decision to End Coverage for Weight Loss Drugs

## WEIGHT LOSS DRUGS BY MONTH



# Introduction of Weight Watchers Program

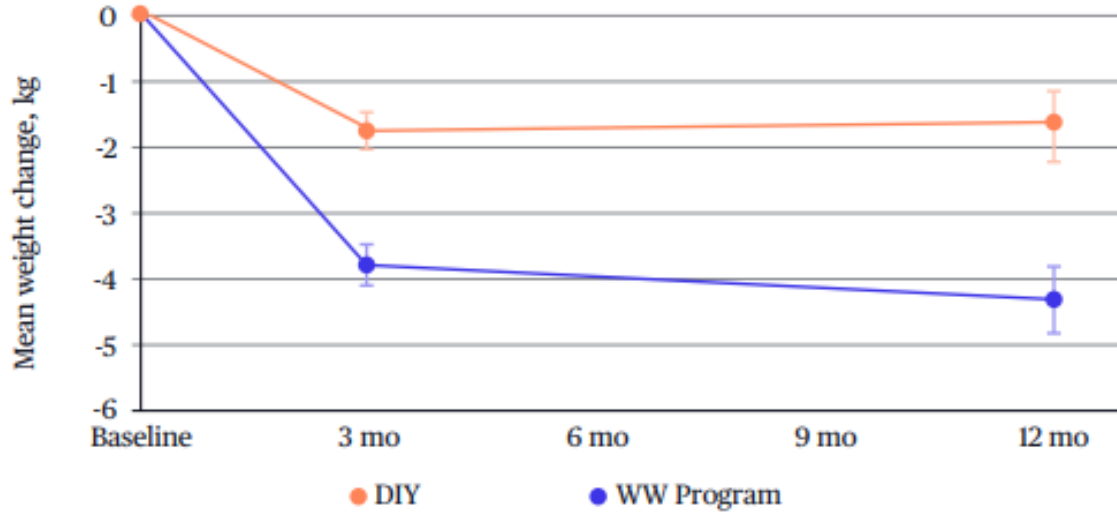
## WeightWatchers By the Numbers



The only weight-loss brand backed by 60 years of proven science

# Introduction of Weight Watchers Program

## Why WeightWatchers?



**12.8%**  
decrease in hunger



**18.2%**  
decrease in sweet cravings

**18.3%**  
Decrease in overall  
cravings



**8.8%**  
Improvement in total  
quality of life

## The #1 doctor-recommended weight-loss program

- Lose weight
- Build healthy habits
- Create behavioral changes
- Be supported



**Quality of Life  
domain  
improvements**

**40.5%**  
in self-esteem

**20%**  
in sexual life

**9.9%**  
in physical function

**13.6%**  
at work

# Introduction of Weight Watchers Program

## Your Journey

*You will receive a custom URL link once the program is launched*

Easy-to-follow Points plan personalized to you



**Download the App**

Learn healthy habits and techniques for better health



**Meal preps, Grocery scanners, Shopping lists, What to order out to eat**

200+ ZeroPoint®, no-track foods to keep you fuller, longer



**Points are based off the questionnaire results**

Join Connect, our members-only social network

Okay, #ConnectFam! 🙌  
Accountability check-in.  
Let's go!

Hit my 50 lb milestone this morning! 🥳

Busy day today... need some tips for grab & go Point-friendly lunch ideas! ty

**Community strength, Partake in a WW Workshop, Chat with your coach**





- **Achieve Sustainable Weight Loss Without Medications:**
  - ✓ Participants see an average weight loss of 4.8%, with those completing the program losing up to 10%, double the CDC's goal.
  - ✓ Focused on building healthy habits for long-term success.
- **Personalized Support for Your Journey:**
  - ✓ Virtual access to expert coaching and resources tailored to your needs.
  - ✓ Weekly guidance on nutrition, physical activity, and behavior change.
  - ✓ Includes tools like a scale and Fitbit to help track your activity and progress.
- **Designed for Your Convenience:**
  - ✓ Fully virtual program that fits seamlessly into your busy life.
  - ✓ Easy-to-use app for goal setting, progress tracking, and connecting with your coach.
- **A Lifestyle-Based Approach:**
  - ✓ Focused on empowering you to manage your weight and health without relying on GLP-1 medications.
  - ✓ Encourages sustainable changes to help you take control of your health.
- **Proven Success, Trusted by Employees:**
  - ✓ Thousands of participants have already benefited from Brook+, achieving better health and improved confidence.
  - ✓ Join a supportive community of individuals committed to their wellness goals.

## RESULTS FROM NY44 MEMBERS

**Current # of enrolled members: 851**

**Current # of lbs. lost: 4,642**

# Question & Answer Session

- **To ask a question please digitally raise you hand using the Zoom feature and wait to be unmuted.**
- **When it is your turn to ask a question, you will be unmuted to ask the question and then re-muted while a panelist answers the question.**
- **Please be brief so we can get to as many questions as possible.**
- **Our panelists will respond to questions until the Open Forum concludes at 4:30 PM.**

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## Questions Submitted in Advance

- 1. Prior authorizations are required for these medications on a yearly basis. How can the trust decide medication is no longer covered if a proper prior authorization process was followed and the medication was deemed appropriate and necessary?* Response: Prior Authorizations are always subject to drug (formulary) coverage/changes, as noted on the Prior Authorization approval letters/documentation. When a drug is removed from formulary (as these drugs are being removed January 1, 2025), the Prior Authorization ends. This sometimes, unfortunately, causes drug coverage to end prior to the end of a Prior Authorization.
- 2. Many medications are used for "off brand" use. For example, Gabapentin. One off brand use for this medication is restless leg syndrome and this medication has been covered without issue. Why are some medications allowed for off brand use but others all of a sudden are not?* Response: Currently, there is criteria related to weight loss that must be satisfied before the weight loss drug is approved. If a doctor is prescribing a drug for weight loss with the intention of it being used to treat any other diagnosis, that is an off-label use of the drug and not something that is currently permitted under the plan.
- 3. What studies/analysis have even done to back up the decision to discontinue coverage for an entire drug class?* Response: The Trust had extensive discussions with Capital Rx and Oswald, reviewing current utilization and cost associated with the coverage of GLP-1s for weight loss. GLP-1s remain covered for a diagnosis of diabetes. In addition, the Trust has been provided and reviewed studies regarding the impact of weight loss drugs on other health conditions. Upon review of these studies, there is no evidence to suggest the use of weight loss drugs lessens the overall cost of health-related conditions.

## Questions Submitted in Advance

4. *Have doctors been consulted about the negative health effects for those discontinued use?* Response: The Trust has been provided and reviewed studies regarding the impact of weight loss drugs on other health conditions. Upon review, there is no evidence to suggest the use of weight loss drugs lessens the overall cost of health-related conditions. In fact, some studies suggest individuals using weight loss drugs saw a rise in associated health conditions, including a rise in cases of pancreatitis.
5. *Why does the NY 44 trust think it is ethical to discontinue the coverage of life changing medications due to their inability to manage costs?* Response: Unfortunately, the Trust had to make the difficult decision to end coverage for weight loss drugs effective January 1, 2025, in order to keep costs down and other coverage available for all Trust enrollees. These drugs are currently being utilized by slightly over 5% of the Trust's population, while significantly increasing cost for all Trust enrollees.
6. *Why are union members being denied the right to appeal this decision?* Response: Decisions to remove drugs completely from formulary are plan design decisions. A member can always appeal a denial, but such denial decision would be upheld as the coverage is no longer available under the plan.
7. *What will be done for members who are forced to discontinue their medication when illnesses and symptoms that have been alleviated return?* Response: If a doctor is prescribing a drug for weight loss with the intention of it being used to treat any other diagnosis, that is an off-label use of the drug and not permitted.



**Thank you for Attending!**

If your question was not able to be answered live, please email it to Stacey Porter, NY44 Trust Benefits Specialist.

**sporter@e1b.org**

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