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May 20, 2024

The Honorable David Weprin Committee on Insurance New York State Assembly

Re: OAC Support for NY A 8045 to Ensure Access to Comprehensive Obesity Care.

Dear Insurance Committee Chair Weprin,

The Obesity Action Coalition (OAC) urges you and your colleagues on the Assembly Committee on Insurance to support passage of NY A 8045. This legislation, which has been introduced by Assemblywoman Karines Reyes, would require comprehensive coverage for the treatment of obesity, including coverage for prevention and wellness, nutrition counseling, intensive behavioral therapy, bariatric surgery, and FDA-approved obesity medications. Throughout the past decades, the prevalence of obesity has skyrocketed across our country and in New York – with 30 percent of adults and more than 15 percent of children (ages 10-17) in the state currently affected by obesity. [1]

The OAC is the leading national non-profit dedicated to serving people living with obesity through awareness, support, education, and advocacy. Our vision is to create a society where all individuals are treated with respect and without discrimination or bias regardless of their size or weight. We strive for those affected by the disease of obesity to have the right to access safe and effective treatment options. OAC has a strong and growing membership of more than 80,000 individuals across the United States and 4,278 members in New York.

Obesity is a complex, multifactorial, common, serious, relapsing, and costly chronic disease that serves as a major risk factor for developing conditions such as heart disease, stroke, type 2 diabetes, renal disease, nonalcoholic steatohepatitis, and 13 types of cancer (which make up 40 percent of all cancers diagnosed).[2] And as such, this disease requires treatment and management just like diabetes, cancer, or high blood pressure. Obesity is driven by strong biology, not by choice and is often the root cause and driver of other health complications. A recent report found that treating obesity can reduce diabetes (-8.9%), hypertension (2.3%), heart disease (-2.6%), cancer (-1.3%), and disability (-4.7%) over 10 years in private insurance coverage and Medicare [3]. The same assumptions can also be applied to Medicaid and state employee health plans.

Despite these facts, many policymakers continue to view obesity as a lifestyle choice or personal failing. Others acknowledge that obesity is a chronic and complex disease, but they believe that all that's needed is more personal will power and prevention programs. These perceptions and attitudes, coupled with bias and stigma, have resulted in health insurance plans taking vastly different approaches in determining what and how obesity treatment services are covered by insurance. It's time for health plans (public and private) to adopt a comprehensive benefit approach toward treating obesity.

Our country must acknowledge obesity for the chronic disease that it is and take steps to treat it in the same serious fashion as other chronic disease states such as diabetes and hypertension. We strongly urge the Insurance Committee to support passage and enactment of A 8045.

We would be happy to meet and share further information and perspectives of people living with obesity. Should you have questions or need additional information, please reach out to our Policy Advisor, Chris Gallagher at chris@potomaccurrents.com. Thank you.

Sincerely,

Joseph Nadglowski, Jr. OAC President and CEO

Cc: Assemblywoman Karines Reyes

[1] Trust for America's Health 2023 State of Obesity Report

[2] Centers for Disease Control and Prevention. https://www.cdc.gov/cancer/obesity/index. Accessed April 26, 2023

[3] Benefits of Medicare Coverage for Weight Loss Drugs. By Alison Sexton Ward, PhD, Bryan Tysinger, PhD, PhuongGiang Nguyen, Dana Goldman, PhD and Darius Lakdawalla, PhD. USC Schaeffer, 2023.