



GBS Population Health

# Coverage of Medications for Weight Loss

---

GBS has been experiencing an influx of questions from employers and plan members regarding the coverage of weight loss medications. More specifically, prescriptions for GIP/GLP-1 medications such as Wegovy, Ozempic, and Mounjaro.

Ozempic (semaglutide) and Mounjaro (tirzepatide) are approved to improve glycemic control in adults with type 2 diabetes (not for use in type 1 diabetes). These drugs also produce significant weight loss in the range of 15%-20% / 35lbs-50lbs. Wegovy (semaglutide - same active ingredient as Ozempic) was approved in 2021 for chronic weight management in adults with a BMI >30 kg/m<sup>2</sup>, or >27 kg/m<sup>2</sup> with at least one weight related comorbid condition (e.g., hypertension, type 2 diabetes, or dyslipidemia).

Currently, most plans cover medications in the GLP-1 category (e.g., Ozempic, Victoza, Trulicity) for type 2 diabetes, often with prior authorization criteria (confirming type 2 diabetes). These drugs are typically not allowed for 'pre-diabetes' - with or without obesity as a co-morbidity. Many, if not most, carriers and employers do not cover weight loss medications.

---

**While these medications are promising for weight loss, they're not magic bullets, and all pharmacologic therapies should be considered as part of a holistic approach to weight loss which may also include a healthy diet, exercise, and behavioral support.**

---

This is an evolving market and one that is likely to change over the coming months and years as there are more approvals (like the weight loss indication for Mounjaro (tirzepatide)). To support the market opportunity for these medications, manufacturers will be rolling out additional data to medicalize obesity and establish the medical and financial benefits of weight loss in certain at-risk populations (kidney disease, obstructive sleep apnea, morbidity / mortality in obesity).

The potential cost implications for widespread coverage of GLP-1's for weight loss is significant with >40% of the US adult population being obese and an annual price tag approaching \$15K per patient.

Covering weight loss medications is a plan decision. For now, we would suggest employers follow the lead of their carrier or PBM to manage these categories through recommended coverage and utilization management criteria, rather than approving one-off exceptions or overrides without a thorough clinical review.

GBS will be providing more information on weight loss and multi-faceted management strategies in the near future.

In the meantime, if you have any questions, please don't hesitate to reach out to your GBS Consultant or the GBS Population Health Team.