



"Our Mission, Your Voice: Empowering Change Together"

March 20, 2025

Committee on Health Coverage, Insurance and Financial Services
100 State House Station
Augusta, ME 04333

Re: Support for An Act to Require Insurance Coverage for Glucagon-like Peptide-1 Receptor Agonist Medication

Dear Chairs and Members of the Committee on Health Coverage, Insurance and Financial Services

The Obesity Action Coalition (OAC) applauds Maine for introducing and taking up LD 627/HP395, as legislation that would “require carriers offering health plans in this State to provide coverage for glucagon-like peptide-1 (GLP-1) receptor agonist medication approved by the federal Food and Drug Administration (FDA) and prescribed by a health care provider.” We support access to evidence-based treatments for obesity. Specifically, we request that the legislation explicitly includes coverage for all FDA-approved indications related to GLP-1s, including for the treatment of obesity. Given that Maine currently has an obesity rate of more than 33%, passage of legislation such as LD 627/HP395 would be an important step toward improving access to affordable and innovative treatments for Mainers living with diabetes and obesity.

The OAC is the leading national non-profit dedicated to serving people living with the disease of 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 85,000 individuals across the United States and 359 in Maine.

Obesity is a complex, serious, and relapsing chronic disease that serves as a major risk factor for developing conditions such as heart disease, stroke, type 2 diabetes, renal disease, non-alcoholic steatohepatitis, and 13 types of cancer (which make up 40 percent of all cancers diagnosed).[1] A recent report also found that if we can treat obesity, we 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



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coverage and Medicare.[2] Obesity care saves money over time. Another recent study of 17,209 adults with a baseline BMI of 30 were estimated to have 7% lower healthcare costs following the loss of 5% of BMI and 30% less healthcare costs following a 25% reduction in BMI.[3] These findings suggest that treating obesity is associated with lower health care spending.

People living with obesity face great difficulty accessing obesity medications. Even if someone has access it does not guarantee drug costs are affordable. Therefore, we support the limit on out of pocket costs included in the legislation - "...may not impose any deductible, copayment, coinsurance or other cost-sharing requirement on an enrollee for that coverage that results in out-of-pocket costs to the enrollee that exceed \$35 per prescription for a 30-day supply of covered prescription medications under this section, regardless of the amount of glucagon-like peptide-1 receptor agonist medication needed to fill the enrollee's prescriptions." Please ensure this explicitly includes obesity indications for GLP-1s.

Obesity is driven by strong biology, not by choice and is often the root cause and driver of other health complications. And as such, obesity disease requires treatment and management just like diabetes, cancer, or high blood pressure. For these reasons, we urge you and your colleagues on the Health Coverage, Insurance and Financial Services Committee to support passage of LD 627/HP395 as part of the legislature's ongoing efforts to secure coverage of comprehensive obesity care for all Mainers. Should you have any questions or need additional information, please feel to contact me or OAC Policy Consultant Chris Gallagher via email at chris@potomaccurrents.com. Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read 'Joe Nadglowski'.

Joe Nadglowski
President & CEO
Obesity Action Coalition

^[1] Centers for Disease Control and Prevention. <https://www.cdc.gov/cancer/obesity/index>

^[2] 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.

^[3] Thorpe KE, Joski PJ. Estimated Reduction in Health Care Spending Associated With Weight Loss in Adults. *JAMA Netw Open*. 2024;7(12):e2449200. doi:10.1001/jamanetworkopen.2024.49200

Tracy Zvenyach
Obesity Action Coalition
LD 627

The Obesity Action Coalition (OAC) applauds Maine for introducing and taking up LD 627/HP395, as legislation that would “require carriers offering health plans in this State to provide coverage for glucagon-like peptide-1 (GLP-1) receptor agonist medication approved by the federal Food and Drug Administration (FDA) and prescribed by a health care provider.” We support access to evidence-based treatments for obesity. Specifically, we request that the legislation explicitly includes coverage for all FDA-approved indications related to GLP-1s, including for the treatment of obesity. Given that Maine currently has an obesity rate of more than 33%, passage of legislation such as LD 627/HP395 would be an important step toward improving access to affordable and innovative treatments for Mainers living with diabetes and obesity. Please see the attached comment letter for full remarks. Thank you.