



39 **WHEREAS** there are significant disparities with regards to access to obesity treatments, with  
40 negative stereotypes about people with higher BMI often resulting in delays in prescribing  
41 recommended medications;<sup>xiii</sup> and

42 **WHEREAS** current insurance coverage for drugs prescribed for weight loss is very limited:  
43 Medicaid coverage varies by state, employer-based and private insurance coverage are reportedly  
44 pulling back coverage due to cost, and Medicare does not cover obesity medication at all,<sup>xiv</sup> and

45 **WHEREAS** some insurance policies currently include extraordinarily complex processes that  
46 require the patient to try medications that are less effective or likely to cause side effects given  
47 their current health issues;<sup>xv</sup> therefore be it

48 **RESOLVED, the Vermont Medical Society will work with other medical societies and**  
49 **health care partners to:**

- 50 • **ensure that all patients have access to anti-obesity medication and treatment in line**
- 51 **with evidence-based medical guidelines;**
- 52 • **ensure that all patients have access to effective lifestyle interventions for obesity that**
- 53 **includes Intensive Behavioral Therapy and dietary and nutrition services;**
- 54 • **ensure Food and Drug Administration (FDA) approved anti-obesity**
- 55 **medication(AOM) coverage is included in all insurance plans available to Vermont**
- 56 **patients, including commercial plans, Vermont Medicaid, and Medicare;**
- 57 • **educate to bring awareness to weight-based disparities in health care and the life-**
- 58 **impacting stigma patients with overweight and obesity face;**
- 59 • **expand/preserve access to surgery for the treatment of obesity; and**
- 60 • **ensure prior authorization or other preauthorization requirements including step**
- 61 **therapy are aligned with evidence-based access to care and are not unnecessarily**
- 62 **complex or designed to make it more difficult to obtain coverage for appropriate**
- 63 **patients.**

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<sup>i</sup> <https://www.cdc.gov/obesity/data/surveillance.html#NPAO>

<sup>ii</sup> <https://www.healthvermont.gov/sites/default/files/2023-02/HSI-BRFSS-2021-DataSummary.pdf>

<sup>iii</sup> <https://www.healthvermont.gov/sites/default/files/document/hsi-yrbs-2021-full-report.pdf>

<sup>iv</sup> <https://publications.aap.org/pediatrics/article/151/2/e2022060640/190443/Clinical-Practice-Guideline-for-the-Evaluation-and?autologincheck=redirected>

<sup>v</sup> <https://www.cdc.gov/nchs/products/databriefs/db360.html>

<sup>vi</sup> <https://media.npr.org/documents/2013/jun/ama-resolution-obesity.pdf>

<sup>vii</sup> <https://www.niddk.nih.gov/health-information/weight-management/adult-overweight-obesity/health-risks>

<sup>viii</sup> <https://www.nejm.org/doi/full/10.1056/NEJMoa2206038>

<sup>ix</sup> <https://www.acc.org/Latest-in-Cardiology/Clinical-Trials/2023/11/09/15/04/select>

<sup>x</sup> <https://www.nejm.org/doi/full/10.1056/NEJMoa2032183>

<sup>xi</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10198472/>

<sup>xii</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6985908/#R1>

<sup>xiii</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10198472/>

<sup>xiv</sup> <https://www.kff.org/policy-watch/will-where-you-live-determine-access-coverage-emerging-anti-obesity-drugs/>

<sup>xv</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10198472/>