

MISSION:

To change how the nation perceives and approaches obesity in the United States.

Treat and Reduce Obesity Act of 2021 (TROA)

The Treat and Reduce Obesity Act of 2021 (S.596, H.R.1577) was introduced in the U.S. Senate and House by Senators Tom Carper (D-DE) and Bill Cassidy, MD (R-LA) and Representatives Ron Kind (D-WI), Tom Reed (R-NY), Raul Ruiz, MD (D-CA) and Brad Wenstrup (R-OH).

The bill aims to effectively treat and reduce obesity in older Americans by enhancing Medicare beneficiaries' access to healthcare providers that are best suited to provide intensive behavioral therapy (IBT) and by allowing Medicare Part D to cover Food & Drug Administration (FDA)-approved obesity drugs.

Facts: Obesity in Older Adults

- About **42.8 percent of adults aged 60 and over** had obesity in 2018.
- Obesity increases the risk for **over 230 medical conditions**, including:
 - High blood pressure, heart disease, certain cancers, arthritis, lipid disorders, sleep apnea and type 2 diabetes.
- As of 2020, around **63.1 million** Americans are enrolled in Medicare.
- The rate of obesity among Medicare beneficiaries **doubled from 1987 to 2002 and nearly doubled again by 2016.**
- Medicare spending on obesity rose to **\$44.3 billion** in 2015, accounting for **6.86%** of total Medicare expenditures.
 - On average, Medicare spends **\$2,018 more** per beneficiary with obesity (in 2019 dollars).

Barriers to Effective Treatment

Medicare Part D is out of step with the latest scientific evidence

- When Congress enacted the Medicare prescription drug program, there were no widely-accepted FDA-approved obesity therapies on the market. At that time, many in Congress believed that obesity was a lifestyle condition, leading to the exclusion of "weight loss drugs" in Medicare Part D.
- Since Medicare Part D was passed, significant medical advances have been made and the FDA has approved several new obesity medications. Other promising therapies are quickly progressing through the agency's approval process.

Intensive Behavioral Therapy coverage is limited

- IBT includes body mass index (BMI), dietary/nutritional assessments and intensive behavioral counseling that promote sustained weight loss through high intensity diet and exercise interventions.
- In 2012, the United States Preventive Services Task Force (USPSTF) recommended "screening all adults for obesity and that clinicians should offer or refer patients with BMI of 30 kg/m² or higher to intensive, multicomponent behavioral interventions." USPSTF concluded that these interventions are an effective component in obesity management, which can lead to an average weight loss of 8.8 to 15.4 pounds and improve glucose tolerance, blood pressure and other risk factors for cardiovascular disease.
- The same year, contrary to the USPSTF report, the Centers for Medicare & Medicaid Services (CMS) limited coverage for IBT to only when services are provided by a primary care provider in the primary care setting.
- Because of CMS's narrow coverage decision, nutrition professionals, community providers, obesity medicine specialists, endocrinologists, bariatric surgeons, psychiatrists, clinical psychologists and other specialists are prevented from effectively providing IBT services.

Take Action!

For more information or to co-sponsor the Treat and Reduce Obesity Act of 2021, please contact:

In the House of Representatives

- Jill O'Brien in Rep. Ron Kind's office at jill.obrien@mail.house.gov or 202-225-5506
- Casey Quinn in Rep. Brad Wenstrup's office at casey.quinn@mail.house.gov or 202-225-3164

In the Senate

- Anthony Theissen in Sen. Tom Carper's office at anthony_theissen@carper.senate.gov or 202-224-2441
- Mary Moody in Sen. Bill Cassidy's office at mary_moody@cassidy.senate.gov or 202-224-5824

OCAN Members

- Academy of Nutrition and Dietetics
- American Academy of PAs
- American Association of Clinical Endocrinology
- American Association of Nurse Practitioners
- American College of Occupational and Environmental Medicine
- American Council on Exercise
- American Gastroenterological Association
- American Psychological Association
- American Society for Metabolic and Bariatric Surgery
- AMGA
- Black Women's Health Imperative
- ConscienHealth
- Endocrine Society
- Gerontological Society of America
- Global Liver Institute
- Healthcare Leadership Council
- MedTech Coalition for Metabolic Health
- National Alliance for Healthcare Purchaser Coalitions
- Novo Nordisk, Inc.
- Obesity Action Coalition
- Obesity Medicine Association
- Strategies to Overcome and Prevent (STOP) Obesity Alliance
- The Obesity Society
- Trust for America's Health
- WW International
- YMCA of the USA

SOURCES:

- Centers for Disease Control and Prevention (2021), *"Adult Obesity Facts."*
- Biener A, et al. (2018), *"The Impact of Obesity on Medical Care Costs and Labor Market Outcomes in the US."* Clinical Chemistry, Volume 64, Issue 1
- Milken Institute (October 2018), *"America's Obesity Crisis: The Health and Economic Costs of Excess Weight."*
- Obesity Action Coalition (2020), *"Treat and Reduce Obesity Act (TROA)."*
- Trust for America's Health and the Robert Wood Johnson Foundation (2012), *"F as in Fat."*