



Weight Loss Medications  
Medical Purposes and Utilization Management Criteria

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# Medical Purpose of Weight Loss Medications

- Weight loss medications can be used for individuals who have health and/or quality of life issues related to being overweight or obese<sup>1</sup>.
- These medications can prevent the development or worsening of certain chronic conditions and medical episodes related to being overweight or obese.
- Weight loss medications are not for everyone with a high BMI or an overweight/obesity diagnosis<sup>1</sup>.
- There are different types of weight loss medications on the market, though the more popular and expensive of these medications are known as GLP-1's.

<sup>1</sup> [National Institute of Diabetes and Digestive and Kidney Diseases](#)

# What Are GLP-1's and How Do They Work?

- GLP-1 drugs, also called GLP-1 agonists, work by mimicking the body's naturally occurring GLP-1 hormone<sup>2</sup>.
- The GLP-1 hormone is naturally released in the gastrointestinal tract in response to eating<sup>1</sup>. It has several roles, including:
  - Triggering insulin release from your pancreas
  - Blocking the secretion of glucagon
  - Slowing stomach emptying
  - Increasing how full you feel after eating<sup>3</sup>

<sup>2</sup> [Harvard Health Publishing – Harvard Medical School](#)

<sup>3</sup> [Cleveland Clinic – GLP-1 Agonists](#)



# Weight Loss and GLP-1 Drugs by FDA Approved Usage

## Weight Loss GLP-1's

- SAXENDA
- WEGOVY
- ZEPBOUND

## Non-GLP-1 Weight Loss Drugs

- ALLI
- CONTRAVE
- DIETHYLPROPION HCL ER
- ORLISTAT
- PHENTERMINE HCL
- QSYMIA

## Anti-Diabetic GLP-1's

- OZEMPIC
- MOUNJARO
- RYBELSUS
- TRULICITY
- VICTOZA
- BYDUREON
- BYETTA

# Weight Loss Medication UM Criteria

- Prior authorization (PA) requirements align with the FDA label for each medication and current clinical guidelines for standard of care and evidence-based clinical literature for weight loss\*. Standard PA requirements for weight loss drugs are as follows:
  - BMI of 30 or higher OR
  - BMI of 27 or higher AND a weight-related health condition
  - The requested drug must be used with a reduced calorie diet and increased physical activity

*\*As the FDA PA criteria differs from drug to drug, certain weight loss medications in the CVS Caremark formulary require advanced authorization requirements such as participating in a comprehensive weight management program for 6 months and/or a set percentage of weight loss reduction for reauthorization where applicable.*

# Long-Term Use of Weight Loss Medication

- Typically, any medication that is used for greater than 12 weeks is considered “long-term” use.
- Various studies have shown that long-term use of weight loss medications in conjunction with lifestyle changes leads to greater weight loss than lifestyle changes alone<sup>4</sup>.
- As Obesity is a chronic disease, long-term medication use is often required for weight maintenance, as the ending of treatment is frequently followed by weight regain, even with continued lifestyle interventions <sup>5</sup>.

<sup>4</sup> [Mayo Clinic – Prescription Weight-Loss Drugs](#)

<sup>5</sup> [Weight regain and cardiometabolic effects after withdrawal of semaglutide: The STEP 1 trial extension](#)

# Weight Loss Medication and Bariatric Surgery

- Many bariatric services adopt a pre-specified weight loss requirement before offering surgery. Some may require people to lose about 5-10% excess weight loss before surgery, depending on various factors such as BMI and current comorbid conditions<sup>6</sup>.
- Weight loss medications can be used in this process prior to bariatric surgery.
- Recent studies are also showing increased success for bariatric surgery patients who utilize weight loss medications after their surgery to maintain results and to decrease the risk of long-term weight re-gain<sup>7</sup>.

<sup>6</sup> [Pre-specified Weight Loss Before Bariatric Surgery and Postoperative Outcomes](#)

<sup>7</sup> [Pharmacologic management of weight regain following bariatric surgery](#)

# Other State Solutions

## Connecticut

- Implemented virtual Flyte program where medications prescribed for weight loss or weight management would only be covered if they were prescribed by a Flyte physician.
- Flyte helps utilizers manage their weight as well as treat some of the complications that come with excess weight, including diabetes, heart disease, sleep apnea, and liver disease.
- This program only pertained to new utilizers after 7/1/2023.
- Currently, Connecticut pays \$110 a month for each participant in this program, anticipated annual cost of \$2 million.

## Tennessee

- Adopted a standard PA in June 2023 for all weight loss and GLP-1 drugs.
- Implemented a custom PA for new users of GLP-1 diabetes medications with no prior diabetes history on file. Current users began being subject to PA as of 2/15/2024.
- Offers weight management and intensive diabetes management programs and incentives through ShareCare benefit program.

## North Carolina

- In October 2023, voted to no longer cover weight loss medications for new prescriptions as of 1/1/2024 and to grandfather the approx. 13,000 members on these medications into continued coverage.
- PBM then removed rebates for all weight loss medications.
- If coverage continued, premiums for members would have increased by \$48.50 a month (current member premiums range from \$25-\$50 a month).
- In January 2024, voted to remove coverage for all weight loss medications beginning 4/1/2024.



# Thank You



Website: [de.gov/statewidebenefits](https://de.gov/statewidebenefits)