



February 23, 2026

Medicaid Oversight and Advisory Board
702 Capital Avenue
Frankfort, KY 40601
Via email: chris.joffrion@kylegislature.gov

RE: Medicaid coverage of GLP-1 medications and 907 KAR 23:010

Dear Co-Chairs Adams and Fleming and Members of the Medicaid Oversight and Advisory Board:

On behalf of the more than 95,000 members of the Obesity Action Coalition (OAC), a national non-profit organization dedicated to giving a voice to individuals affected by the disease of obesity, we would like to express our strong support surrounding the Kentucky Department for Medicaid Services' proposed amendment to the Kentucky Cabinet for Health and Family Services, which would remove outdated language that prohibits Medicaid from covering FDA-approved obesity medications (OMs).

We understand that the upcoming Medicaid Oversight and Advisory Board meeting on February 23 will feature a discussion regarding Medicaid coverage of GLP-1 weight loss medications. We encourage the Board to recognize that more than 34 percent of Kentuckians are affected by obesity and the Commonwealth now has the 9th highest rate of obesity in the country. Obesity is a serious chronic disease that requires treatment and management like diabetes, cancer, or high blood pressure. Obesity is recognized as a disease by major medical organizations such as the American Diabetes Association, American Medical Association, American Academy of Family Physicians, American Association of Clinical Endocrinologists, American Heart Association, National Institutes of Health, The Obesity Society and the World Health Organization.

Nevertheless, stigma and bias associated with recognizing obesity and treating it as a chronic disease remains prevalent. We must work constantly to dispute the outdated and medically incorrect perception that obesity is a lifestyle choice and due to a lack of self-discipline or personal failing. Removal of this discriminatory language under the Medicaid program is critical to ensuring that Kentuckians struggling with obesity can receive safe and effective treatments for this serious, chronic disease.

We also want to draw your attention to two recent studies showing significant return on investment with appropriate obesity medication use and comprehensive obesity care.

A recent Aon employer focused study captured significant financial and health benefits from ensuring appropriate access to OMs. This research was featured at a recent Milken Institute Global Conference.

- "For those taking OMs, the rate of growth, known as the medical cost trend – was cut roughly in half, the researchers said. There was a 44% reduction in major cardiovascular issues. There was a substantial reduction in osteoporosis. There was a substantial reduction in pneumonia of multiple types."

Additionally, Milliman recently shared an analysis of the pharmaceutical cost savings obtained by providing comprehensive obesity care in a Connecticut state employee pilot program.

- “Approximately \$430,000 to \$1.2 million (1% to 3% of the total CT state employee OM pharmacy spend in the study period) was avoided based on the rejected claims and by switching eligible program participants to lower net cost therapies appropriate for each member.”

As stated, when referencing the obesity management pilot in the April 2025 Connecticut Healthcare Containment Committee meeting.

- “This is just another example of the progress someone has made in just two months. They have eliminated three medications and will soon eliminate a fourth while losing 24 pounds. Anyone with diabetes or who is overweight should be encouraged to consider this. This is just one testimonial from one of our satisfied clinical members”

Finally, the Kentucky Medicaid program should take into account the lower prices for these obesity medications that the Trump Administration is rolling out as part of a new 402 demonstration project for 2026 and Center for Medicare and Medicaid Innovation demo beginning in 2027 that will allow Medicaid programs (that opt in) to purchase these GLP-1 medications at a monthly cost of \$245.

Clearly, access to OMs and comprehensive obesity care is effective at improving health status and reducing near and long-term health care costs. Removing the prohibition on obesity medication coverage would allow Kentucky to explore coverage options that could improve health outcomes, expand access to care, and reduce the \$36.3 billion economic costs of obesity in the Commonwealth.

Thank you again for your consideration of this request and please feel free to contact OAC Policy Advisor Chris Gallagher at chris@potomaccurrents.com should you have questions or need additional information.

Sincerely,

A handwritten signature in black ink, appearing to read 'Joe Nadglowski', written in a cursive style.

Joe Nadglowski
President & CEO