

March 12, 2021

The Honorable Bill Cassidy
U.S. Senate
520 Hart Senate Office Building
Washington, DC 20510

Dear Senator Cassidy:

On behalf of the physician and medical student members of the American Medical Association (AMA), I am writing to express our support for S. 596, the “Treat and Reduce Obesity Act.” This bill represents a real opportunity to treat, reduce, and prevent obesity in adults by making targeted therapy more widely available to Medicare beneficiaries, requiring Part D coverage of medications to treat obesity, and calling for further action at the federal level.

Medicare now covers “intensive behavioral therapy for obesity” at no cost to the beneficiary if the therapy is furnished by a physician in primary care or other defined specialty, or by a certain non-physician, and takes place in a physician office, a hospital outpatient department, or in an independent or public health clinic. S. 596 would allow Medicare to pay a physician who is not in primary care for providing this therapy in any appropriate setting, including community-based sites. Other appropriate providers could also receive Medicare payment for this therapy, including psychologists, diet and nutrition professionals, and “evidence-based, community-based lifestyle counseling programs,” but only if they have a referral from a physician or primary care practitioner and work in collaboration and coordination with them, including keeping them informed of recommendations and treatment plans. S. 596 has an important safeguard that any community-based site must comply with federal privacy regulations under HIPAA (the Health Insurance Portability and Accountability Act).

The bill would also require Medicare Part D plans to cover drugs that treat obesity or support weight loss management for individuals who are overweight and have other health problems. The Secretary of Health and Human Services would report back to Congress every two years on the bill’s implementation and make recommendations for better coordinating and leveraging federal programs to support research and clinical care to address obesity in adults.

As our country continues to deal with the impact of COVID-19, we have learned that obesity and obesity-related diseases are significant risk factors for severe disease and hospitalization among COVID-19 patients. On October 6, 2020, the Centers for Disease Control and Prevention updated its guidance to reflect that patients with overweight (BMI>25 but BMI<30) might also be at increased risk of severe illness from COVID-19.¹

Americans need every possible tool at our disposal in our response to this pandemic, and improving coverage for anti-obesity medications and intensive behavioral therapy would ensure Medicare beneficiaries have access to the full spectrum of interventions to manage obesity and prevent other serious chronic diseases.

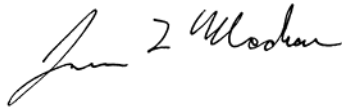
¹ [Certain Medical Conditions and Risk for Severe COVID-19 Illness | CDC](#). (updated October 6, 2020).

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The AMA has long supported heightened efforts to address the health problems associated with obesity and to offer patients the resources and the support they need to maintain a healthy weight. The AMA House of Delegates has adopted policy deeming obesity a “disease” to raise awareness of the problem within health care and to increase treatment opportunities and options. Obesity also contributes to the widespread problems of diabetes and hypertension, and this bill would achieve a positive step forward in supporting the AMA’s strategic initiative to address these conditions.

Thank you for your leadership on this issue. We look forward to working with you to achieve passage of the “Treat and Reduce Obesity Act” to support the health of our nation’s Medicare population.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim L. Madara". The signature is written in a cursive, flowing style.

James L. Madara, MD