

Vermont Medicaid and Exchange Advisory Committee Meeting Agenda

1.	10:00	Call to Order	Mary Kate Mohlman & Sharon Henault, Co-Chairs
2.	10:05	Roll Call Establish Quorum Approve Previous Minutes	Jennifer Rotblatt, Administrative Services Coordinator (Department of Vermont Health Access, "DVHA")
3.	10:10	Global Commitment Waiver Open Forum	Ashley Berliner, Healthcare Policy Director (DVHA)
4.	10:25	Weight Loss Drug Coverage	Christine Ryan, Director of Clinical Operations (DVHA)
5.	10:50	Co-Chair Role and Nominations	Mary Kate Mohlman & Sharon Henault, Co-Chairs
6.	11:05	MEAC Budget Letter Subcommittee	Mary Kate Mohlman & Sharon Henault, Co-Chairs
7.	11:15	Medicaid Renewal Status Update	Adaline Strumolo, Acting Commissioner (DVHA)
8.	11:30	Commissioner's Office Update	Adaline Strumolo, Acting Commissioner (DVHA)
9.	11:40	Public Comment	Mary Kate Mohlman & Sharon Henault, Co-Chairs
10.	11:50	Final Committee Discussion	Mary Kate Mohlman & Sharon Henault, Co-Chairs
11.	12:00	Adjourn	Mary Kate Mohlman & Sharon Henault, Co-Chairs

April 22, 2024
10:00 am - 12:00 pm

Roll Call, Quorum, March 25, 2024 Meeting Minutes

Jennifer Rotblatt, Administrative Services Coordinator (DVHA)

Global Commitment Waiver Open Forum

Ashley Berliner, Healthcare Policy Director (DVHA)

Weight Loss Drug Coverage Project

Christine Ryan, Director of Clinical Operations (DVHA)

Purpose

Identify Fiscally Responsible Best Practices for Treating Obesity In Order to Impact and Improve Health Related Conditions

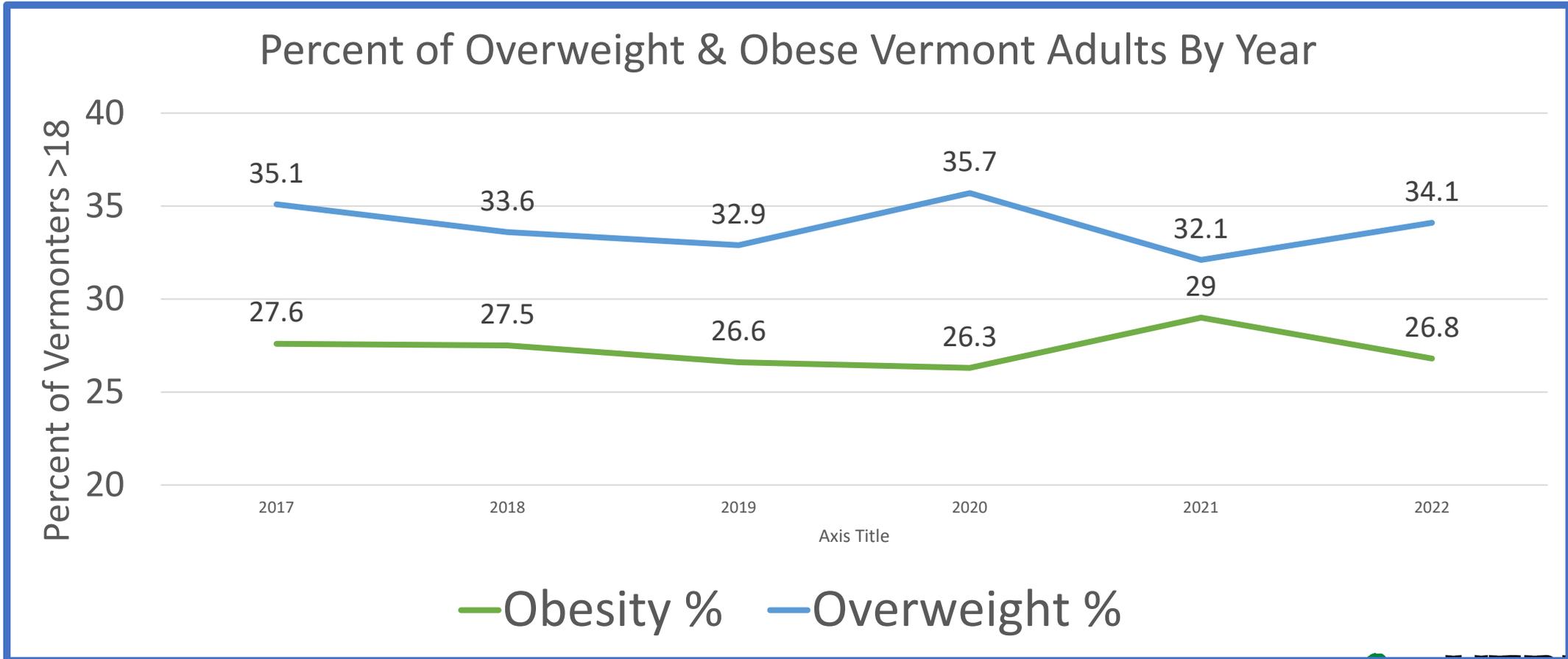
The What

- Cost-Benefit Analysis of Weight Loss Treatment Options for the Vermont Medicaid Population
- **Goal:** Pave the way for personalized and sustainable solutions in obesity management

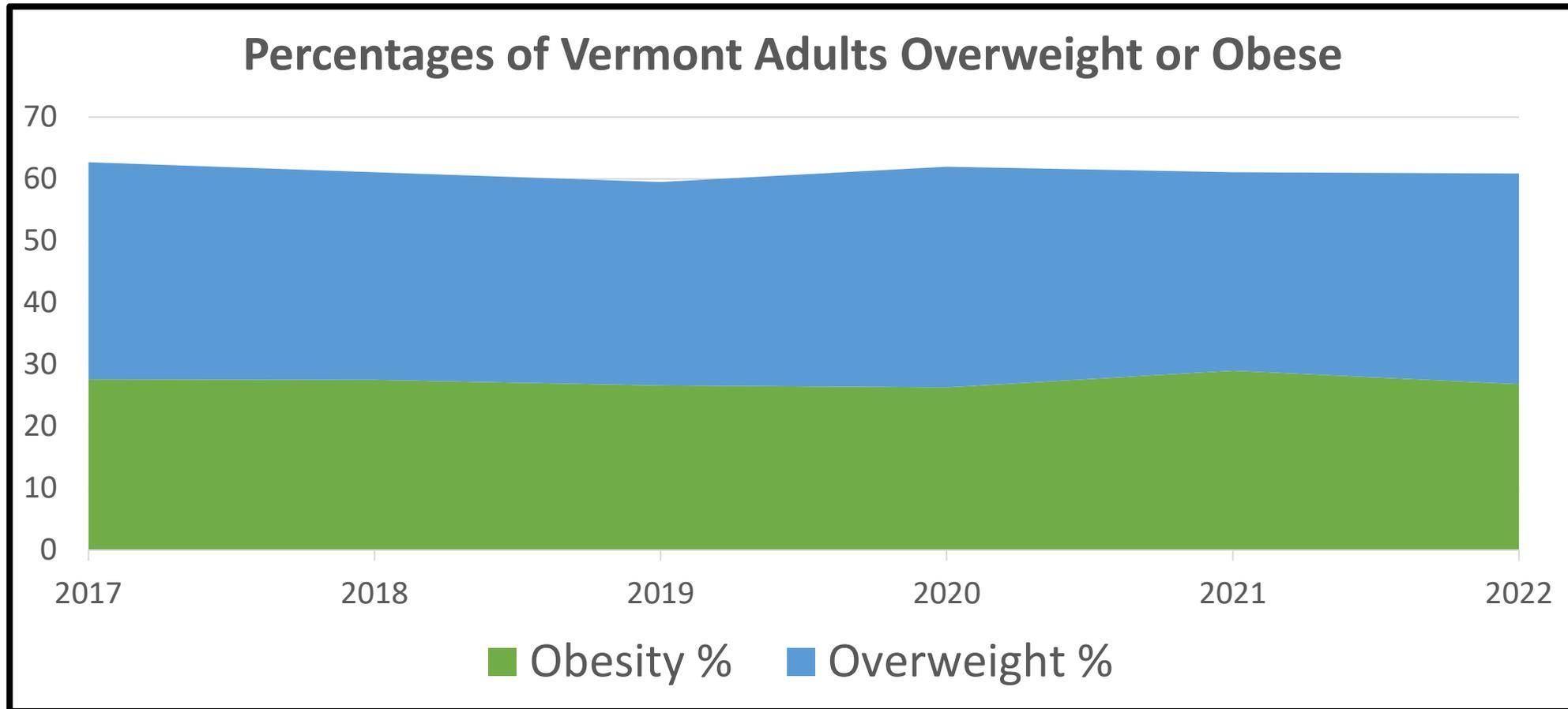
The How

- Evaluation of national data to understand the broader context of obesity costs directly and indirectly
- Examination of the prevalence and impact of obesity within the Vermont Medicaid population
- Determination of:
 - The financial impact of obesity & related health conditions on the state of Vermont
 - The financial impact of currently covered treatments for obesity and related health conditions on the state of Vermont
 - The financial implications of providing coverage for currently non-covered treatments for obesity

The Problem



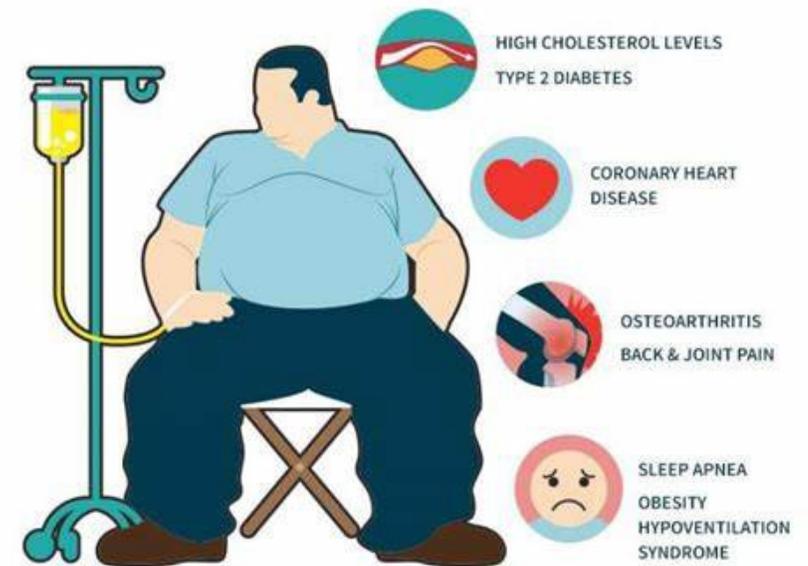
The Problem (cont.)



The Landscape

- Direct Medical Cost of \$260 billion (2016)
- Individuals who were obese cost an additional \$1,429 (42% higher) (2006)
- \$45 billion/year in medical cost and work loss for obese employees (2008)

Obesity-Related Diseases



The Process

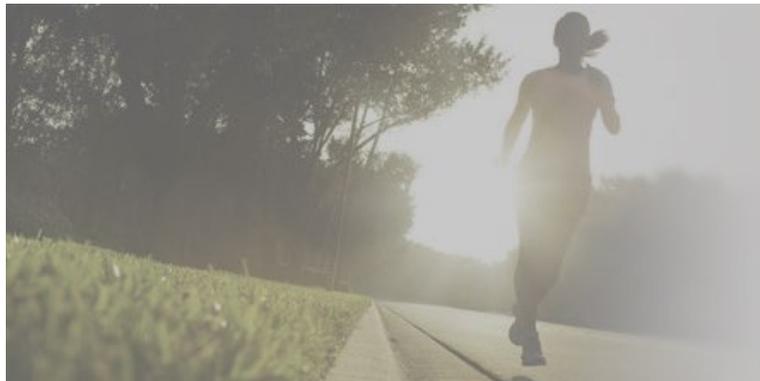
- Identify currently covered obesity treatments Medicaid members
 - Bariatric Surgery
 - Nutritionists
 - VT Dept. of Health Programs ([Home – MyHealthyVT](#))
- Identify what's not covered
 - Medications
 - Lifestyle Interventions
- Evaluate cost and benefit of new and existing weight loss medications
 - Identify limitations and long-term concerns
- Evaluate cost and benefit of comprehensive lifestyle interventions
 - Not currently widely available in VT

Medications

- Weight loss medications to treat obesity are currently not covered under the Vermont Medicaid benefit
- The coverage policies are governed by Title XIX of the Social Security Act, which influences the inclusion or exclusion of weight loss agents
- Additionally, Vermont also considers Medicare regulations when determining coverage
- Currently, Medicare does not allow for the coverage of such medications
- Weight loss medications may be prescribed to address conditions resulting from obesity (Diabetes and CBP)
- DVHA is assessing current and new medication cost and benefits

Lifestyle Interventions

- The new medications received FDA approval based on studies that included lifestyle modification
- Second phase of project is examining lifestyle interventions
 - Does Vermont have the infrastructure to provide comprehensive lifestyle intervention?
 - Would creating avenues for comprehensive lifestyle intervention provide healthier and better sustained weight-loss?
 - Could this be used in place of medications at a lower cost and budgetary impact?
 - Does the need to provide lifestyle intervention along side the medication increase the overall cost associated with a decision to cover weight loss medication?



Current Status

DVHA supports coverage for weight loss medications in a clinically appropriate and fiscally responsible manner and emphasizes the following:

1. Treatment of obesity in accordance with national guidelines which indicate comprehensive lifestyle intervention (behavioral modifications) is the initial step.
2. Coverage of select medications, when utilized according to current treatment guidelines and FDA indications (must include lifestyle component).
3. There is a need for comprehensive lifestyle programs for the treatment of obesity, to help reduce the need for lifelong medications use.

Ask of the MEAC

- Is DVHA's approach in exploring and addressing this complex issue on target?
- Is there anything that could be added to improve DVHA's efforts?
- Any insights to share?

Co-Chair Role and Nominations

Mary Kate Mohlman & Sharon Henault , Co-Chairs

MEAC Budget Letter Subcommittee

Mary Kate Mohlman & Sharon Henault , Co-Chairs

Medicaid Renewal Status Update

Adaline Strumolo, Acting Commissioner (DVHA)

Medicaid Renewal Dashboards – Discussion

<https://dvha.vermont.gov/unwinding/renewal-dashboard>

Commissioner's Office Update

Adaline Strumolo, Acting Commissioner (DVHA)

Public Comment & Final Committee Discussion

Adjourn

Mary Kate Mohlman & Sharon Henault , Co-Chairs