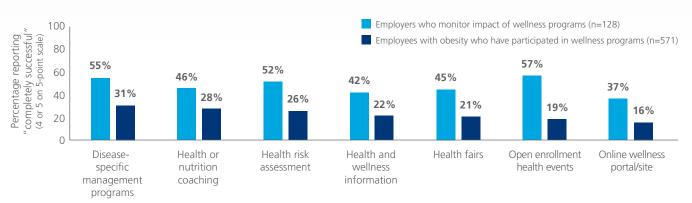
Studies show that wellness programs alone are often insufficient to help employees with obesity

The ACTION^a study found that wellness programs have limited success and are perceived unfavorably by employees



• The study, published in the journal *Population Health Management*, indicated that **only 17% of employees with obesity viewed wellness programs as beneficial**, compared with 72% of employers^{1,b}

Success of selected wellness activities¹



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- Although all employers reported providing coverage for weight management, including prescription weight-loss medications, only 13% of employees with obesity indicated that this benefit was offered by their employer¹
 - There is an opportunity for employers to **better communicate their benefits** to employees
- Corporate wellness programs are considered a solution for improving employee health and well-being, but are not meeting the needs of people with obesity¹
 - Employers in the United States have been increasing their funding for wellness programs. Large employers, on average, **spent an estimated \$3.6 million** on these programs in 2019²

The ACTION study emphasized the need for a holistic approach to weight management, including lifestyle modifications and medical treatments.¹

• Obesity and its complications are associated with significant costs to employers, payers, and health systems³



Another study involving 4834 employees found that a comprehensive workplace wellness program did not significantly improve health^{4,a}

• This clinical trial, published in the *Journal of the American Medical Association*, found that after 12 and 24 months, the wellness program had **no significant effects** on⁴



Measured physical health outcomes





Use of healthcare services

• This study **adds to a growing body of evidence** that wellness programs are unlikely to significantly improve employee health in the short term⁴

Weight management plans that include pharmacotherapy as an adjunct to lifestyle modification may be more effective than lifestyle modification alone^{5,b}



Providing coverage for AOMs, in addition to wellness programs, can give people with obesity the assistance they need to manage their weight.

To learn more about obesity in the workplace, go to https://www.novonordiskworks.com/.

^aA 2-year randomized clinical trial of 4834 employees of the University of Illinois at Urbana-Champaign. The members of the treatment group (n=3300) received financial incentives and paid time off for annual onsite biometric screenings, annual health risk assessments, and ongoing wellness activities (eg, physical activity, smoking cessation, and disease management).⁴

^bResults from a 1-year study of 224 men and women aged 18 to 65 years, with body mass index of 30 to 45 kg/m², randomly assigned to receive pharmacotherapy (sibutramine) alone, lifestyle-modification counseling (delivered in 30 group sessions), or pharmacotherapy with lifestyle-modification counseling (combined therapy). Subjects who received pharmacotherapy alone lost a mean (±SD) of 5.0±7.4 kg; subjects who received lifestyle modification alone lost 6.7±7.9 kg; and subjects who received combined therapy lost 12.1±9.8 kg.⁵

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