

The State of Obesity in

Georgia



2,806,053 Adults living with obesity^{1,2,a}

33.9%
Percentage of adults with

obesity²

Prevalence of obesity varies depending on the population³:

42.5% Blacks

30.5% Whites 32.7% Hispanics **28.7**% Seniors

 a Obesity is defined as BMI ≥30 kg/m 2 . Class 2 or 3 obesity is defined as BMI ≥35 kg/m 2 . 4 BMI=body mass index.

(aged ≥65 years)

These counties have the highest percentage of people with obesity in Georgia⁵:



48% Randolph



47%
Hancock



45% Dougherty

Obesity is a major risk factor for cardiometabolic disease.⁶ In Georgia, the prevalence of cardiometabolic comorbidities of obesity include:



36.6% Hypertension⁷



36.6%
High cholesterol⁸



12.3%

Diahetes^{9,b}

^bEstimates do not differentiate between type 1 and type 2 diabetes (T2D). T2D accounts for 90-95% of all diabetes cases and the data presented here are more likely to be characteristic of T2D.

National Obesity Statistics

The direct and indirect costs of obesity for employers



Employees with obesity can incur up to a **2.5X** increase in costs vs employees of normal weight^{10,c}



Absence due to illness or injury is

increased 128% for employees with obesity, or **3** additional days per year¹¹

\$14,341 to \$28,321 employee with

Cost per employee with obesity per year^{10,d}

\$271 to \$542

Annual productivity loss per employee with obesity¹¹

Includes medical, pharmacy, sick days, disability, presenteeism, and workers' compensation costs. Cost increase depends on class (severity) of obesity.

dRange is based on class (severity) of obesity.

Anti-obesity Medications (AOMs) and Coverage for Georgia Residents¹²

AOMs are FDA-approved medications for the management of obesity.



Nationwide Coverage^a

AOMs are covered by over 90% of National Pharmacy Benefit Managers.



Georgia Plan Coverage^a

AOMs are covered on the following plans in Georgia:

FFS Medicaid^b

^aCoverage data as of January 2023.

bTeen coverage only.

FFS=fee for service.

References: 1. U.S. Census Bureau. 2020: ACS 1-year estimates subject tables. Accessed March 31, 2023. https://data.census.gov/table?t=Age+and+Sex&g=0100000US\$0400000&y=2021&tid=ACSST1Y2020.S0101&moe=false&tp=true 2. Nutrition, physical activity, and obesity: data, trends and maps. Centers for Disease Control and Prevention website. Accessed March 31, 2023. https://nccd.cdc.gov/dnpao_dtm/rdPage.aspx?rdReport=DNPAO_DTM.ExploreByTopic&islClass=OWS&islTopic=OWS1&go=GO 3. BRFSS prevalence & trends data: BMI categories. Centers for Disease Control and Prevention website. Accessed February 13, 2023. https://nccd.cdc.gov/BRFSSPrevalence/rdPage.aspx?rdReport=DPH_BRFSS.ExploreByTopic&irbLocationType=StatesAndMMSA&islClass=&islTopic=&islYear=&rdRnd=58747 4. What is obesity? Obesity Medicine Association website. Accessed February 13, 2023. https://obesitymedicine.org/what-is-obesity/ 5. County health rankings model: adult obesity. County Health Rankings & Roadmaps website. Accessed May 3, 2023. https://www.countyhealthrankings.org/explore-health-rankings/county-health-rankings-model/health-behaviors/diet-and-exercise/adult-obesity?year=2023&tab=1&state=13 6. Regan JA, Shah SH. Obesity genomics and metabolomics: a nexus of cardiometabolic risk. Curr Cardiol Rep. 2020;22(12):174. 7. BRFSS prevalence & trends data: high blood pressure. Centers for Disease Control and Prevention website. Accessed March 31, 2023. https://nccd.cdc.gov/BRFSSPrevalence/rdPage.aspx?rdReport=DPH_BRFSS.ExploreByTopic&irbLocationType=StatesAndMMSA&islClass=&islTopic=&islYear=&rdRnd=58747 8. BRFSS prevalence & trends data: high cholesterol. Centers for Disease Control and Prevention website. Accessed March 31, 2023. https://nccd.cdc.gov/BRFSSPrevalence/rdPage.aspx?rdReport=DPH_BRFSS.ExploreByTopic&irbLocationType=StatesAndMMSA&islClass=&islTopic=&islYear=&rdRnd=58747 10. Ramasamy A, Laliberté F, Aktavoukian SA, et al. Direct and indirect cost of obesity among the privately insured in the United States: a focus on the impact by type of industry. J Occu

