Anti-Obesity Medication Coverage Guide

Refer to these steps when pursuing anti-obesity medication access for your employee

The medical reimbursement landscape is different for an anti-obesity medication. Similar to smoking-cessation therapies and fertility drugs, health care professionals, insurance providers, and employers share in the responsibility of helping people obtain the anti-obesity medication they need. If you have been asked for access to a specific anti-obesity medication by an employee or a health care provider and are not currently covering the drug as part of your benefit package, use this guide to help.

STEP 1

CONTACT YOUR HEALTH PLAN OR PHARMACY BENEFIT MANAGER (PBM)

- Inform your health plan or PBM account manager that you have an employee seeking coverage for an anti-obesity medication
- Learn about any requirements for the exceptions process

STEP 2

OBTAIN INTERNAL APPROVAL

- Contact the appropriate internal stakeholder(s) about benefits modification for an employee
- Communicate any mandated requirements given by the health plan or PBM for the exceptions process

STEP 3

PROVIDE YOUR HEALTH PLAN OR PBM WITH ANY NECESSARY INFORMATION

• Your health plan or PBM may request medical information directly from your employee's health care professional

STEP 4

EXPLAIN ANTI-OBESITY MEDICATION COVERAGE TO YOUR EMPLOYEE

• Your employee should let his/her health care professional know when coverage has been approved

You must assess and ensure there is no gap in care for your employees. It's imperative that employers become active participants in assisting employees with their medication needs. This resource can help facilitate the process.

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