The Use of GLP-1 Medications in Workers' Compensation

Continuing Education Webinar August 27, 2024 3:00 PM ET

All attendees are in listen-only mode.





Continuing Education Credits

The Use of GLP-1 Medications in Workers' Compensation

This course has been approved for 1-hour of CE for the following license types: Preapproved Adjuster (AK, AL, CA, DE, FL, GA, ID, IN, KY, LA, MS, MT, NC, NH, NM, NV, OK, OR, TX, UT, VT, WY); National Certified Case Manager (CCM); National Nurse; Certified Disability Management Specialists (CDMS), and Certified Rehabilitation Counselor (CRC) for CE accreditation. For states that do not require prior approval, the adjuster is responsible for submitting their attendance certificate to the appropriate state agency to determine if continuing education credits can be applied.

CE credits are only available for those who qualify during the LIVE version of the webinar taking place on August 27, 2024, at 3:00 PM ET.

CE credits for our courses are administered by the CEU Institute. If you have any issues or questions regarding your credits, please contact <u>rosters@ceuinstitute.net</u>.



To Qualify for Continuing Education Credits...



Attend the LIVE version of this webinar



Remain logged in to the entire webinar



Answer all three poll questions.

(Questions will appear on the screen and will be read aloud.)



After the webinar, if you qualify for continuing education credits...



Within 48 hours, you will receive an email from The CEU Institute on our behalf.

(Check your junk mail!)



The email includes a Credit Submission Link



Use that link to submit for your credits within **72 hours**.

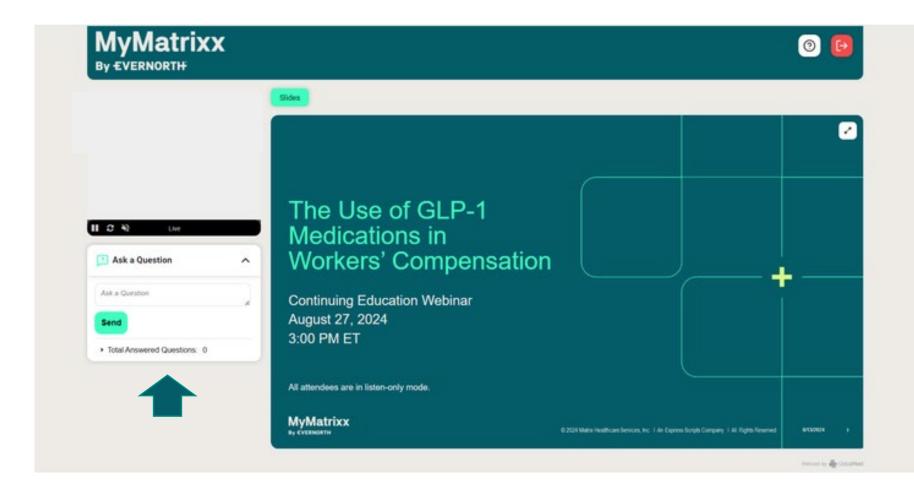
If you will miss the 72-hour window, or have questions about the CE course, email us at mymatrixx.cem.



Once you submit, for CE credits, it can take up to **30 days to process** before credits are reported or you receive a certificate.



Ask a question



Questions for our speakers will be answered as time allows.

For the questions
we do not get to,
we will respond via email
after the webinar.



Medical disclosures and disclaimers

Disclosure

No planner, presenter or content expert has a conflicting interest affecting the delivery of this continuing education activity. MyMatrixx does not receive any commercial advantage nor financial remittance through the provided continuing education activities.

Medical disclaimer

Within this presentation, the authors have checked with sources believed to be reliable in their efforts to provide information that is complete and generally in accord with the standards accepted at time of publication. In case of human error or changes in medical sciences, neither MyMatrixx nor any other party involved in the preparation or publication of this work warrants the information contained herein is in every respect accurate or complete and are not responsible for errors or omissions or for the results obtained from the use of such information. Readers are encouraged to confirm the information contained herein with other sources.

This educational activity may contain discussion of published and/or investigational uses of agents that are not approved by the Food and Drug Administration (FDA). We do not promote the use of any agent outside of approved labeling. Statements made in this presentation have not been evaluated by the FDA.

Disclaimer

The display or graphic representation of any product or description of any product or service within this presentation shall not be construed as an endorsement of that product by the presenter or any accrediting body.

Accreditation of this continuing education activity refers to recognition of the educational activity only and does not imply endorsement or approval of those products and/or services by any accrediting body.

CE credits for this course are administered by the CEU Institute. If you have any issues or questions regarding your credits, please contact rosters@ceuinstitute.net.



Today's presenters



JULIE BLACK, RPH
Senior Clinical Account Executive



COURTNEY DECK, RPH
Senior Clinical Account Executive



Agenda

- GLP-1s in the market
- How GLP-1s work
- Diabetes and GLP-1 Medications
- Obesity and GLP-1 Medications
- GLP-1 Medication Trends
- GLP-1 Medication Management



will be using GLP-1 drugs by 2035.1



Report having used a GLP-1.²

1,500 people surveyed

June 2024 survey of 279 employers³

Since Oct 2023...

8 percentage point

Jump in employer coverage

57%
provide coverage for diabetes only
Up from 49%

34%
provide coverage for both diabetes and weight loss
Up from 26%

8.9%
total annual claims are
for GLP-1 drugs
for weight loss
Up from 6.9%

¹ Morgan Stanley Research analysts https://www.definitivehc.com/blog/obesity-diabetes-GLP-1-drug-trends

² KFF (formerly Kaiser Family Foundation) https://jamanetwork.com/journals/jama/article-abstract/2819949#:~:text=About%201%20in%208,poll%20involving%20about%201500%20respondents.

^{3.} International Foundation of Employee Benefit Plans (IFEBP) June 2024survey https://www.shrm.org/topics-tools/news/benefits-compensation/employer-coverage-of-glp-1-drugs-jumps#:~:text=On%20average%2C%208.9%25%20of%20organizations,those%20surveyed)%20to%20control%20costs.

GLP-1s in workers' comp claims

In recent years, the use of GLP-1s in the commercial and workers' comp industries has increased exponentially.

These medications might be covered as part of treatment for **diabetes and obesity**–two comorbid conditions that can greatly impact an injured workers' recovery and the trajectory and cost of a claim.





What are GLP-1 Medications and how do they work?



GLP-1 = Glucagon-like peptide-1 agonist

- + GIP = Glucose-dependent insulinotropic polypeptide
- + GLP-1s are available as both oral and injectable medications
- + Injectable GLP-1s have risen in popularity with the discovery of their ability to precipitate weight loss in type 2 diabetics

GLP-1 prescriptions for weight loss have seen an exponential rise over recent years, with over 5 million prescriptions written in 2022

—a 2000% increase since 2019⁴

4. Analysis Shows GLP-1s Work Best with Behavior Change Support. OmadaHealth.com



Primary GLP-1s on the market

Each GLP-1 has a brand name approved for treatment of diabetes and a brand name approved for treatment of obesity

GLP-1	Diabetes Brand Name	Weight Loss Brand Name
Semaglutide (GLP-1 agonist)	Ozempic®	Wegovy®
Tirzepatide (GLP-1 and GIP agonist)	Mounjaro®	Zepbound®
Liraglutide (GLP-1 agonist)	Victoza [®]	Saxenda [®]

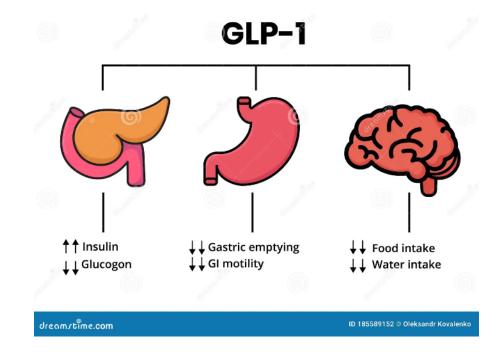


How GLP-1 Agonists Work

GLP-1 is hormone synthesized in the small intestine. *GLP-1s mimic this hormone and bind to and activate the GLP-1 receptor*

GLP-1 agonists have multiple functions in the body:

- + **Triggers insulin** to be released from the pancreas causing a decrease in the amount of glucose in the blood
- + **Blocks glucagon release** preventing more glucose from going into the blood
- + Slows stomach emptying and digestion leading to the body releasing less glucose from the food itself
- + **Increases satiety**, which causes the brain to tell the body that it is full after eating



GLP-1 Agonists: What They Are, How They Work & Side Effects (clevelandclinic.org)



14

Side effects of GLP-1s

- + Loss of appetite
- + Nausea/vomiting
- + Diarrhea

These GI effects are more likely when initiating therapy or increasing dose.

5. GLP-1 Agonists: What They Are, How They Work & Side Effects (clevelandclinic.org)







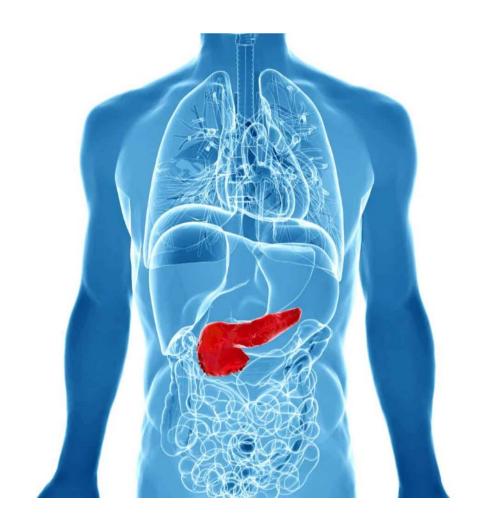
Diabetes and GLP-1 Medications



The Pancreas: Small organ, big responsibility

Located behind the stomach

- + Right side (the head) lies at the curve of the first segment of the small intestine called the duodenum
- + Left side (the tail) extends slightly upward and ends near the spleen



6. The Pancreas | Johns Hopkins Medicine

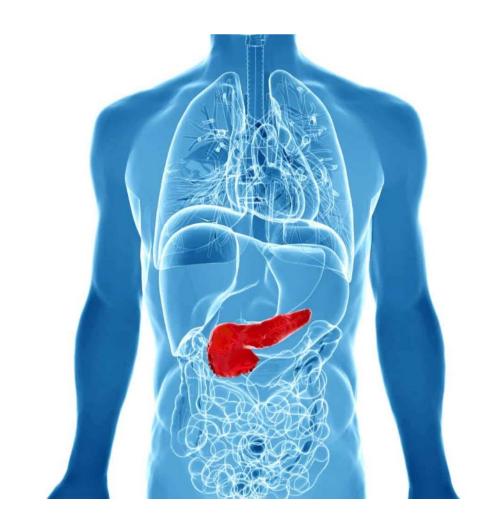


18

The Pancreas: Small organ, big responsibility

Two types of glands in the pancreas:

- + **Exocrine** Secretes digestive enzymes that help break down carbohydrates, fats, proteins, and acids in the duodenum
- + Endrocrine Contains the Islets of Langerhans and secretes hormones (insulin and glucagon regulate blood sugar and somatostatin prevents release of insulin and glucagon



6. The Pancreas | Johns Hopkins Medicine



19

Three main diabetes types

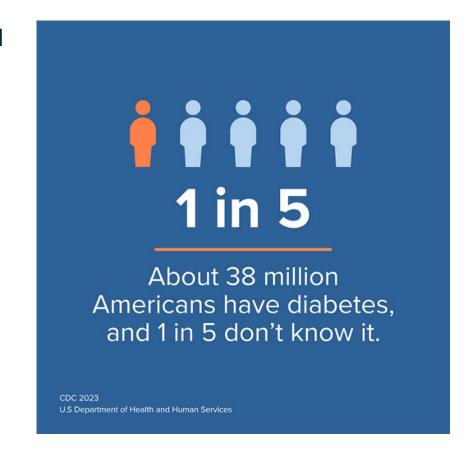
Type 1 Type 2	Gestational
 + Thought to be autoimmune, body attacks the pancreatic cells that make insulin + Patients will need to take insulin for the rest of their lives + Accounts for approximately 5-10% of people who have diabetes + The body doesn't use available insulin well and can't keep blood sugar levels normalized + Can be prevented or delayed by losing weight, eating healthy and being active + Approximately 90-95% of people diabetes have type 2 diabetes 	have never had diabetes + Typically goes away after the baby is born and increases risk of developing type 2 diabetes later in life

7. What is diabetes? | CDC



Type 2 Diabetes By the Numbers

- + Prevalence of diabetes in adults in the U.S. has significantly increased from 2001 to 2021⁶
 - + 38.4 million (11.6%) of the U.S. population has diabetes
 - + 29.7 million diagnosed with diabetes during this timeframe
- + Total estimated cost of diabetes in 2022 was \$413 billion⁸ (\$307 billion directly attributed to medical costs)
- + More than 50% of new diabetes cases could be prevented by decreasing obesity prevalence⁹
- + Patients with diabetes are two times more likely to experience heart disease or stroke¹⁰



8. By the Numbers: Diabetes in America | Diabetes | CDC | Diabetes | Diabetes | CDC | Diabetes | Diabetes



21

Diabetes is not typically the work-related injury that qualifies a worker for benefits¹¹

- + Most often, diabetes is a comorbid condition that can negatively affect the trajectory of the claim
- + Diabetes may become compensatory based on worsening of the condition due to employment (i.e., presumptive claims)



11. Workers' Compensation for Diabetes - New York Law Firm (nydisabilitylaw.com) 12. Diabetes Drives Workers' Comp Costs | Woodruff Sawyer



Diabetes results in a higher risk of complications due to the reduced healing process

Wound healing is slowed as a result of:¹¹

- + Poor circulation inhibition of blood flow to the extremities
- + **Neuropathy** inability to feel when a wound occurs resulting in delayed treatment
- + **High blood sugar** slows the absorption of nutrients and oxygen
- + **Decreased immune function** suppression of immune cells

11. Workers' Compensation for Diabetes - New York Law Firm (nydisabilitylaw.com) 12. Diabetes Drives Workers' Comp Costs | Woodruff Sawyer



Guidelines for Treatment of Type 2 Diabetes

Treatment includes medications, lifestyle and diet modifications and exercise

- + Glucagon-like Peptide-1 agonists (GLP-1s) may be initiated if:13
 - + Metformin treatment is unsuccessful or contraindicated
 - + Hemoglobin A1C is higher than the target
 - + Hemoglobin A1C goal hasn't been reached within three months of treatment and additional conditions (atherosclerosis, heart failure, or chronic kidney disease) are present
- + The Professional Practice Committee of the American Diabetes
 Association recommends a Hemoglobin A1C of less than 7% for
 many nonpregnant adults without significant hypoglycemia

Metformin is typically the initial pharmacological treatment for type 2 diabetes.

13. GLP-1 Agonists: What They Are, How They Work & Side Effects (clevelandclinic.org)







Obesity and GLP-1 Medications



Body Mass Index (BMI)

The World Health Organization (WHO) uses BMI to define obesity and overweight¹⁴

+ BMI=Weight (kg)/height² (m²)

+ Obesity is defined: BMI > 30

+ Overweight is defined: BMI > 25



14. Obesity and overweight (who.int); 15. FDA Approves First Treatment to Reduce Risk of Serious Heart Problems Specifically in Adults with Obesity or Overweight | FDA ;16. CDC Data, 2021. https://www.cdc.gov/nchs/data/nhsr/nhsr158-508.pdf; 17. American Heart Association, 2021. https://www.ahajournals.org/doi/full/10.1161/JAHA.120.018799



Obesity Statistics

Worldwide adult obesity has more than doubled since 1990¹⁴

- + In 2022, 2.5 billion adults were overweight and of these, 890 million were obese
- + ≈70% of U.S. adults are considered either obese or overweight¹⁵ which equates to about 24 million people or about 1% of the world
- + 42% of Americans are considered obese¹⁶ or **16% of the world's obese population**



14. Obesity and overweight (who.int); 15. FDA Approves First Treatment to Reduce Risk of Serious Heart Problems Specifically in Adults with Obesity or Overweight | FDA ;16. CDC Data, 2021. https://www.cdc.gov/nchs/data/nhsr/nhsr158-508.pdf; 17. American Heart Association, 2021. https://www.ahajournals.org/doi/full/10.1161/JAHA.120.018799



Up to **53%** of new type 2 diabetes cases link to obesity.¹⁷



Healthcare Risks of Obesity

- + Obesity increases the risk of many health problems including¹⁸:
 - + Type 2 diabetes
 - + Cardiovascular disease
 - + Stroke
 - + Metabolic syndrome
 - + Respiratory issues
 - + Osteoarthritis
 - + Some cancers
 - + Diseases of the liver, pancreas, gallbladder, kidneys



Obesity substantially raises an individual's risk of developing type 2 diabetes, coronary heart disease and hypertension¹⁷

77%

of diabetes patients have high cholesterol and/or high blood pressure¹⁹

18. Health Risks of Overweight & Obesity - NIDDK (nih.gov); 19. Express Scripts book of business data, 2016 20. Know Your Risk for Heart Disease | cdc.gov



Cardiodiabesity

The triad of obesity, diabetes, and cardiovascular disease

- + Cardiodiabesity is responsible for roughly \$719 billion in annual healthcare costs in the United States
- + Nearly 90% of patients with type 2 diabetes are either overweight or obese¹⁸
- + Both diabetes and obesity itself increase the risk of cardiovascular disease

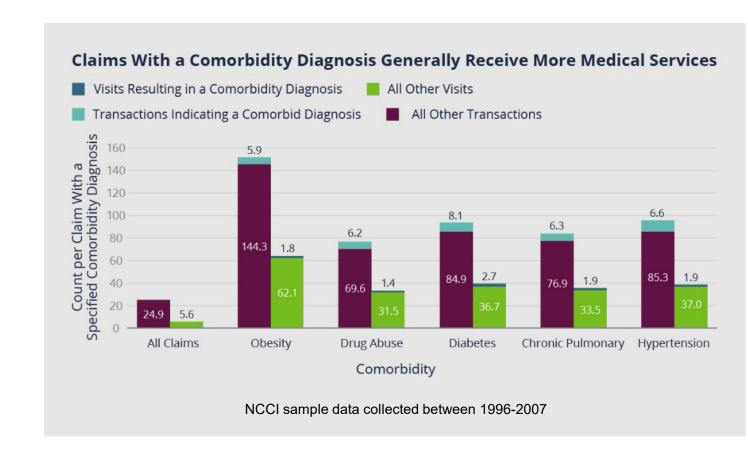
18. Health Risks of Overweight & Obesity - NIDDK (nih.gov); 20. Know Your Risk for Heart Disease | cdc.gov



31

Obesity hinders recovery from injuries and increases the time to return to work or maximum medical improvement (MMI)

- + Obesity hinders the ability to participate in various treatment modalities and diminishes the ability to have surgery
- + NCCI data showed that claims with comorbidities including obesity and diabetes receive more medical services and therefore are more costly²¹



21. <u>Diabetes Drives Workers' Comp Costs | Woodruff Sawyer</u>



GLP-1 Treatment of Obesity/Overweight

Three injectable GLP-1s indicated for treatment of obesity or overweight individuals

- + Wegovy was FDA approved on March 8, 2024, for reduction of risk of cardiovascular death, stroke, and heart attack in adults with cardiovascular disease who are either obese or overweight (First pharmacological treatment carrying this indication²²)
- + In clinical trials, a 68-week course of Wegovy resulted in an average weight loss of nearly 15%

GLP-1s for Obesity
Wegovy
Zepbound
Saxenda

22. FDA Approves First Treatment to Reduce Risk of Serious Heart Problems Specifically in Adults with Obesity or Overweight | FDA



The value of GLP-1 medications

- + The market for obesity drugs is expected to reach \$77 billion by 2030²³
- + A survey by 9amHealth revealed that when evaluating healthcare coverage, Americans place more value on coverage for weight loss drugs than childcare assistance, unlimited PTO, or work-from-home²³



23. Insurance Coverage for Weight Loss Drugs is More Important Than Work-From-Home Perks For Most Americans, New 9amHealth Survey Finds (prnewswire.com)







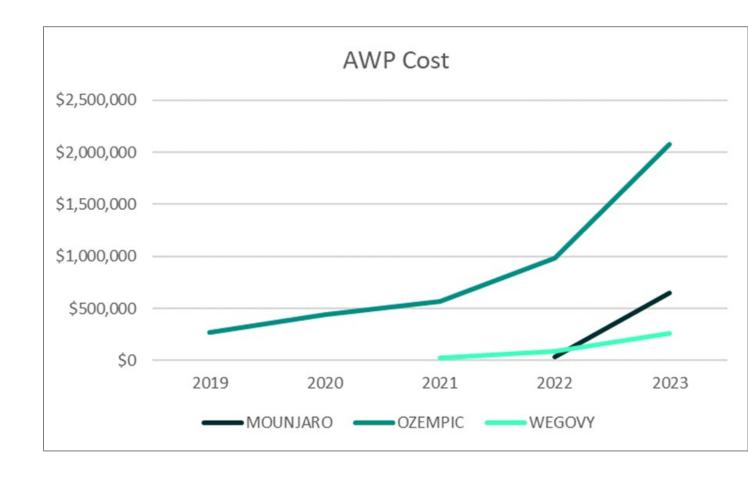
GLP-1 Medication Trends



GLP-1s in the Market

Data from the MyMatrixx book of business

- + Injectable GLP-1 spend trend has increased year over year since 2019
- + Spend increased 160% from 2022 to 2023 and the trend thus far in 2024 continues to spark concern





Recent FDA approvals for weight loss indications are adding to the growth of the GLP-1 category

- + A new GLP-1, Zepbound, entered the market in late 2023
- + Wegovy obtained FDA approval in March 2024 to decrease cardiovascular risk in obese and overweight individuals
- + These approvals will continue to energize utilization of this class of medications

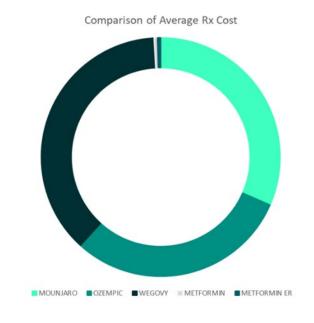


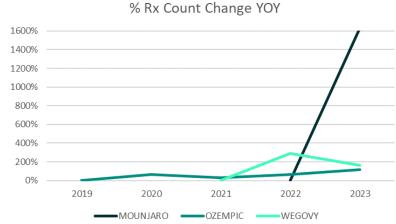
38

GLP-1s vs. Metformin for Treatment of Diabetes

GLP-1 agonists are significantly more costly than metformin

- + Average script cost of GLP-1s is 60 to 80 times more than metformin
- + Average script cost of GLP-1s
 has remained steady since
 their introduction
- + Utilization has steadily increased which has driven up costs significantly





Sales Projections

Z epbound [®]	Ozempic [®]	Wegovy®
 + Approved in November 2023 for treatment of obesity + Week of 3/8/24, the number of prescriptions surpassed rival, Wegovy®, for the first time since launch 	Maker, Novo Nordisk, projects sales will be ≈\$16.1 billion in 2024 ²⁴ That amount would make it the second top-selling drug behind the cancer treatment, Keytruda®	In March 2024, Medicare announced Wegovy® will be covered under its Part D program for obese or overweight patients who have pre-existing heart disease to prevent heart attacks or strokes ²⁵

24. 9 Ozempic updates (beckershospitalreview.com); 25. Medicare to Cover Weight-Loss Drug Wegovy for Certain Patients | MedPage Today



40

Expected Trend in Workers' Compensation

GLP-1 agonists are not typically included in workers' compensation formularies

- + Payers covering presumptive claims may cover diabetes medications
- + Utilization of authorization criteria recommended to ensure appropriate use and guideline adherence
- + The discovery of GLP-1 effectiveness in the treatment of obesity has resulted in greater utilization of the "diabetes" GLP-1s (Ozempic and Mounjaro) in workers' compensation
- + Until 2022, use of GLP-1 weight loss drugs was minimal
 - + Wegovy utilization has increased exponentially beginning in 2022
 - + With the approval of Zepbound, GLP-1s for treatment of obesity are poised to become a top class of drugs by spend for workers' compensation payors



GLP-1 Medication Management

PBM trend management

The escalating costs associated with GLP-1s, whether used to treat diabetes or obesity, are at the forefront of PBM trend management

Coverage decisions include:

- + Determination of which patients will benefit from these medications
- + Length of treatment
- + Compliance with diet and exercise programs



Controlling Escalating Costs



Medical Necessity

Determine the indication for prescribing and if related to injury



Utilization Management

Patients with lower BMI who do not have diabetes or cardiovascular disease driven to alternative treatments



Patient Support

Coaching, social support, and behavioral health management are necessary to prevent rebound weight gain after treatment

26. <u>Understanding GLP-1 for Weight Loss | Evernorth</u>



GLP-1 Medication Take Aways



GLP-1 agonists are one of the fastest growing classes of drugs in both commercial and workers' compensation plans

- + Although GLP-1s are expensive, the savings associated with decreased risk of both diabetes and cardiovascular disease likely outweighs the cost
- + In workers' compensation specifically, the treatment of obesity leads to:
 - + Decreased claim costs
 - + More successful physical medicine encounters
 - + Increased surgery candidacy and presumed repair of the injury
- + Use of utilization management and patient support strategies increases the likelihood of successful GLP-1 treatment and decreased waste in this category



Thank you!

If you meet the requirements for CE credit, you will receive an email from the CEU Institute on our behalf within 48 hours after the webinar. The email will contain a link that you will use to submit for your CE credits. (Make sure you check your junk mail!)

You must complete this task within 72 hours.

Watch for information on our next CE webinar! Specialty Drugs in Workers' Comp November 12, 2024



References

- 1. Morgan Stanley Research analysts
- 2. KFF (formerly Kaiser Family Foundation)
- 3. International Foundation of Employee Benefit Plans (IFEBP) June 2024survey
- 4. Analysis Shows GLP-1s Work Best with Behavior Change Support. OmadaHealth.com
- 5. GLP-1 Agonists: What They Are, How They Work & Side Effects (clevelandclinic.org)
- 6. The Pancreas | Johns Hopkins Medicine
- 7. What is diabetes? | CDC
- 8. By the Numbers: Diabetes in America | Diabetes | CDC
- 9. American Diabetes Association, 2023
- 10. American Diabetes Association, 2019
- 11. Workers' Compensation for Diabetes New York Law Firm (nydisabilitylaw.com)
- 12. <u>Diabetes Drives Workers' Comp Costs | Woodruff Sawyer</u>
- 13. GLP-1 Agonists: What They Are, How They Work & Side Effects (clevelandclinic.org)
- 14. Obesity and overweight (who.int)
- 15. FDA Approves First Treatment to Reduce Risk of Serious Heart Problems Specifically in Adults with Obesity or Overweight | FDA
- 16. CDC Data, 2021. https://www.cdc.gov/nchs/data/nhsr/nhsr158-508.pdf
- 17. American Heart Association, 2021. https://www.ahajournals.org/doi/full/10.1161/JAHA.120.018799
- 18. Health Risks of Overweight & Obesity NIDDK (nih.gov)
- 19. Express Scripts book of business data, 2016
- 20. Know Your Risk for Heart Disease | cdc.gov
- 21. <u>Diabetes Drives Workers' Comp Costs | Woodruff Sawyer</u>
- 22. FDA Approves First Treatment to Reduce Risk of Serious Heart Problems Specifically in Adults with Obesity or Overweight | FDA
- 23. Insurance Coverage for Weight Loss Drugs is More Important Than Work-From-Home Perks For Most Americans, New 9amHealth Survey Finds (prnewswire.com)
- 24. 9 Ozempic updates (beckershospitalreview.com)
- 25. Medicare to Cover Weight-Loss Drug Wegovy for Certain Patients | MedPage Today
- 26. Understanding GLP-1 for Weight Loss | Evernorth

