

From: Office of the Governor Site Support  
Sent: 1/10/2015 5:42:45 PM  
To: Haley, Nikki  
Cc:  
Subject: Support EHB Coverage of Obesity Treatment Services

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January 10, 2015

The Honorable Nikki R. Haley  
Governor of South Carolina  
1205 Pendleton Street  
Columbia, SC 29201

Dear Governor Haley:

As someone who is affected by obesity, as a healthcare professional who provides treatment for this chronic disease and a fitness instructor, I urge you to support fair and equal coverage of evidence-based and medically necessary obesity treatment services, such as bariatric surgery and FDA-approved obesity drugs, within the state health exchange essential health benefit package.

Similar to many other medical conditions, obesity is a complex, multifactorial chronic disease, which requires a multidisciplinary treatment approach. This approach must encompass the best standards of care, both in terms of the treatments chosen, and the care coordination and clinical environment in which they are delivered.

Just as those affected by heart disease receive their care through a coordinated multidisciplinary treatment team, those affected by obesity should also follow a similar continuum of coordinated care. Because of the complex nature of obesity and its variety of impacts on both physical and mental health, effective treatment requires the coordinated services of providers from several disciplines and professions (both physician and non-physician) within both of these treatment areas.

It was for these reasons in 2013 that the American Medical Association (AMA) adopted formal policy designating obesity as a disease and why the AMA supports patient access to the full continuum of care of evidence-based obesity treatment modalities such as behavioral, pharmaceutical, psychosocial, nutritional, and surgical interventions.

We all know the staggering financial, physical and psychosocial costs of obesity, both to the affected individual and our society as a whole. For these reasons, more public and private health plans now cover bariatric surgery and are examining their current drug formularies in the wake of numerous new obesity drug approvals by the FDA.

For example, the federal Office of Personnel Management now encourages all Federal Employee Health Benefit (FEHB) Program carriers and Multi-State Health Plans to provide patient access to the full range of obesity treatment interventions and warned FEHB plans that excluding coverage for treatment services on the basis that obesity is a "lifestyle" condition and not a medical one or that obesity treatment is "cosmetic" is no longer permissible.

In short, we need to start treating obesity seriously, at both the healthcare and policy level. We are hopeful that you will utilize your position as the chief executive of our state to ensure that patients have access to, and coverage of, these critical treatment services under the state health exchange EHB package for 2016. I look forward to your reply.

Sincerely,

Sincerely,

Patricia L. Eichhorn, MD, FACS