

Bridging the care gap

# 3 Reasons to Rethink Your Employee Obesity Management Plan





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Obesity is a growing health concern that affects the lives of millions of people, impacting not only their overall health, but their well-being and productivity as well. With estimations projecting that **50%** of Americans will be living with obesity by 2030, the need for affordable and effective weight-loss solutions has become increasingly urgent.

Outside of it being the right and necessary thing to do for employees—it's also a strategic investment. By supporting access to evidence-based obesity care, companies can reduce long-term healthcare costs, improve outcomes, and lighten the financial burden for their personnel. The question now becomes: if we know what works, what's holding us back from making it the standard?

**Many individuals face significant barriers to accessing obesity care, including financial constraints and limited availability of professionals. Employers who invest in providing obesity care can foster a healthier, more engaged workforce.**

## Market-rate care is a roadblock to results

The out-of-pocket price tag for obesity care runs steep and understanding the real cost of obesity care is key to understanding why access—especially through employer-sponsored programs—matters so much.

Without coverage, individuals seeking solutions often face a fragmented system and lofty out-of-pocket expenses. From medical appointments and behavioral coaching to obesity medications, the cumulative cost can quickly become a barrier to care. Understanding the costs associated with obesity care is essential for recognizing the value of employer-sponsored programs.

Some costs associated with different obesity care providers can include:



### Primary Care Physician (PCP) Visit:

A general visit with a **primary care physician** averages **\$100 to \$300** without insurance, with additional costs for lab work, medications, follow-ups, or referrals.

#### Registered Dietitian (RD) visit:

If required by a PCP, an uninsured single visit with a **registered dietitian** typically costs between **\$100 and \$250** per session, with most patients requiring multiple visits for sustained success averaging \$50–\$150, and not necessarily including any custom meal plans or similar medical nutrition therapies.

For employees managing obesity, these costs add up quickly and can discourage them from seeking the care they need – or going a risky route by trying a direct-to-consumer GLP-1 compounding pharmacy. Employers have an opportunity, and a responsibility to step in, not just as benefit providers, but as catalysts for better access, outcomes, and financial sense for everyone involved.





## The hidden cost of obesity is too big to ignore

Obesity significantly increases the risk of developing a range of debilitating chronic conditions, such as heart disease, diabetes, and even certain types of cancer. These interconnected health issues can lead to serious complications, including reduced quality of life, musculoskeletal disorders, and beyond. And what's more, the financial implications are staggering; healthcare costs associated with treating obesity-related illnesses can strain individuals, families, and healthcare systems alike.

Take heart disease, for example—one of the most common and costly conditions linked to obesity. In 2020 alone, annual healthcare expenditures for treating heart disease among adults in the civilian population totaled a staggering **\$114.9 billion**, averaging \$5,540 per adult. And that's just one condition in a much larger picture.

When employers ignore the root causes, they're not avoiding costs—they're deferring them. These "hidden" costs—rising claims, medication dependence, disability, and lost productivity—add up quickly, often silently, and can weigh heavily on both company budgets and employee lives.



The cost of heart disease:  
**\$114.9 billion** a year.

**By addressing obesity through prevention and treatment, we can not only improve health outcomes but also lessen the economic impact as a whole.**

# Delayed care means delayed outcomes

Even when individuals can afford obesity care, timely access remains a significant hurdle depending on where they live. The availability of obesity providers varies widely across the country, leading to prolonged wait times and diminished patient engagement.

Consider the following disparities:



## Obesity Medicine Physicians

The American Board of Obesity Medicine reports less than 10,000 obesity medicine-certified physicians across the US and Canada who are expected to serve **100 million** US adults with obesity today.

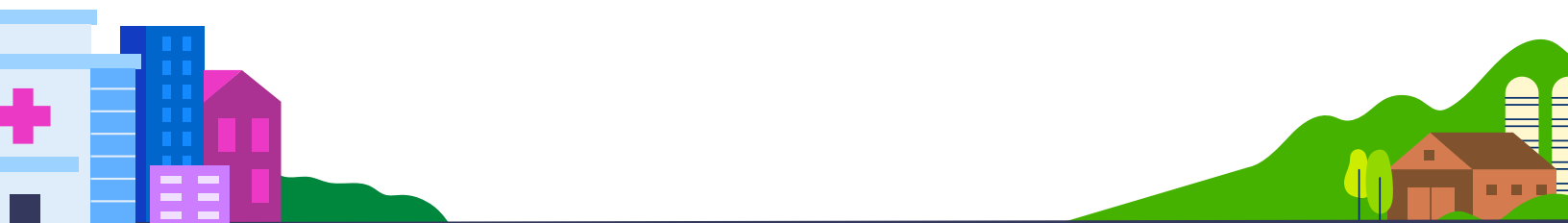


## Registered Dietitians (RDs)

As of September 30, 2024, California boasts 11,714 RDs, while Oklahoma has only 1,185. This stark contrast means that residents in less-served states may face longer waits for nutritional counseling.

These disparities mean that individuals in certain regions may wait months to access care. Delays such as these can lead to progression of conditions, decreased motivation from patients, and overall increased healthcare costs due to more complex issues in the long run.

Employers can play a pivotal role in bridging this access gap. By offering integrated, clinically led, virtual obesity care solutions, they can ensure timely support for employees, regardless of their location.



# 3 key benefits of employer-sponsored obesity care

By opening access to obesity care, employers demonstrate a commitment to their employees' well-being while also fostering a more productive and engaged workforce. Here are three compelling reasons to consider integrating obesity care into your employee health initiatives:



## Healthier, happier, more productive workforce

Employees who receive support in managing their weight often experience increased energy levels, improved focus, and reduced absenteeism. Wellness programs have been shown to decrease employee absenteeism by up to **50%**, leading to significant gains in productivity.

Moreover, companies that implement comprehensive wellness programs report a **66%** improvement in work efficiency and a **67%** boost in employee happiness.



## Improved employee satisfaction and retention

Employees who feel supported in their health journeys are more likely to remain with their employers. Studies indicate that **87%** of employees consider health and wellness programs when choosing an employer, and **67%** of employees are more likely to stay with a company that offers such programs. Furthermore, companies that prioritize employee well-being see a **25%** increase in employee retention.



## Reduced healthcare costs

Preventive care, including obesity management, can significantly reduce the likelihood of costly medical interventions. For every dollar spent on preventive care programs, medical costs fall by **\$3.27**, and create a reduction in time away from work in tandem. Additionally, promoting preventive care helps improve overall population health, significantly reducing long-term costs and the impact of catastrophic claims on employer health plans.

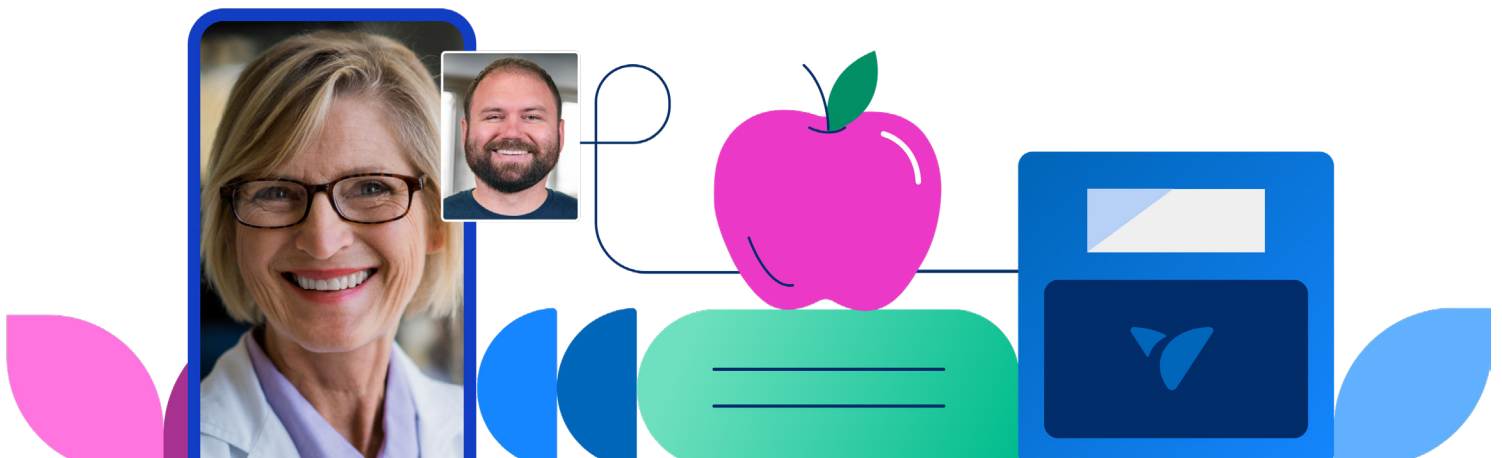
# Deliver convenient, affordable access to care with Vida

Providing easy access to obesity care isn't just a generous gesture—it's a smart, strategic investment in your workforce and your business. When financial barriers are removed, employees are more likely to engage with care early, stick with it longer, and see meaningful results. And when employees feel supported in their health journeys, they bring that energy back to work—in the form of greater focus, lower absenteeism, and stronger engagement.

At Vida, our integrated clinical model is designed to do more than just drive weight loss. We deliver whole-person care that addresses the behavioral, medical, and emotional root causes of obesity. This approach leads to better adherence, reduced reliance on medications, and lower overall healthcare costs. In fact, 62% of our members begin with behavior change alone—demonstrating just how powerful the right support can be, even without immediate medical intervention.

## Our outcomes speak for themselves

- ✓ An average annual savings of **\$2,040** per engaged member in total cost of care
- ✓ **40%** reduction in GLP-1 utilization compared to unmanaged care
- ✓ Only **16%** of new members who haven't been on a GLP-1 in the past year are prescribed one when joining a Vida program



Want to see how our  
obesity management  
outcomes stack up?

See our outcomes

