



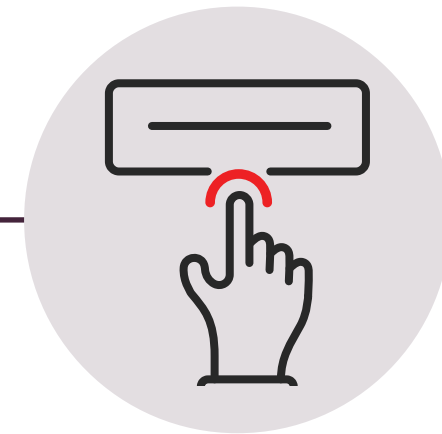
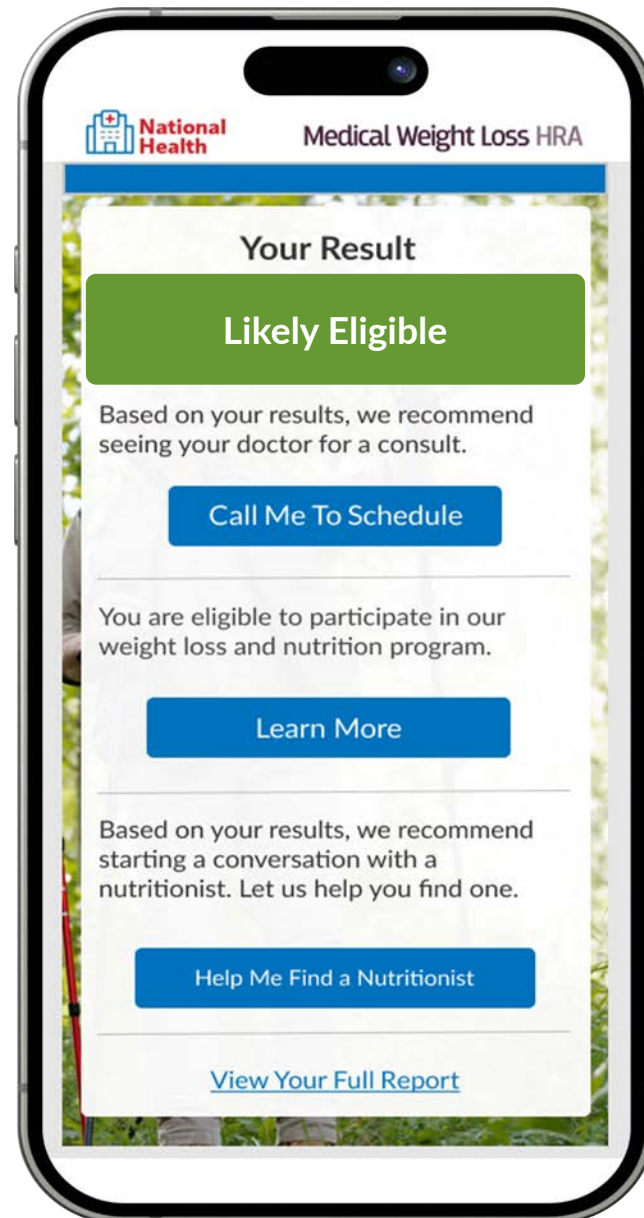
MEDICAL WEIGHT LOSS HRA

GOAL: REFER TO PRIMARY CARE FOR PHYSICAL EVALUATION

LIKELY ELIGIBLE

People in this category have the following:

- a body mass index (BMI) of 30.0 or greater
- OR-
- a diagnosis of type 2 diabetes
- AND-
- **do not** report any of the following:
 - history of pancreatitis
 - gallbladder disease
 - diabetic eye disease
 - kidney or liver disease
 - personal or family history of thyroid cancer (MTC) or MEN2
 - pregnant, breast feeding or planning pregnancy
 - planning surgery or anesthesia in the next 2 weeks
 - type 1 diabetes



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of console on:

- Scheduling an evaluation appointment with the primary care or metabolic health service line.
- Viewing educational videos or material about medical weight loss and/or type 2 diabetes management.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and inquire about past attempts to lose weight.
- Explain that weight-loss medication eligibility depends on many factors which only a doctor can evaluate.
- Encourage either a seminar or an appointment to review their eligibility for medical weight loss.



NURTURING

Customize your nurturing content to explain:

- The positive impact even a small weight loss can have on their overall health.
- That weight management plans may include a combination of therapies or behaviors including staying active lowering stress, taking medication, or having surgery.
- The availability of individualized treatment plans for obesity and/or type 2 diabetes based on their needs and lifestyle.



PRIMARY CARE FOLLOW-UP

- BMI of 30.0 or higher (weight management services and medication support).
- Uncontrolled type 2 diabetes (endocrinology).
- Quality of life greatly impacted by weight (mental health evaluation).
- Smoking or low weekly exercise (behavior-specific programs).



EXAMPLE PERSONA

Jason is 42 years old. Over the past several years, his weight has steadily increased due to long work hours, limited time for exercise, and stress. He is 5'10" and currently weighs 245 pounds (BMI 35).

Jason has high blood pressure and was recently diagnosed with type 2 diabetes. He feels tired most days and has noticed that his weight is making it harder to stay active and manage his health.

He has tried diet and exercise programs with limited success and is now looking for a medical option to help control his appetite, improve his blood sugar, and support long-term weight management.



MEDICAL WEIGHT LOSS HRA

GOAL: REFER TO PRIMARY CARE FOR PHYSICAL EVALUATION

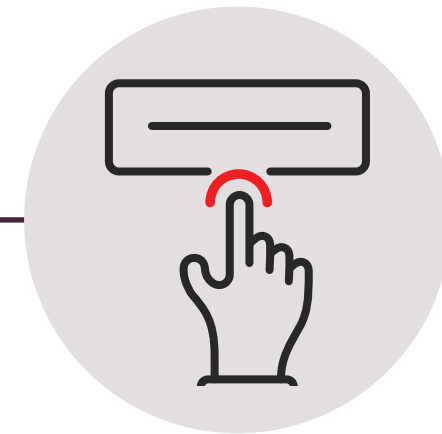
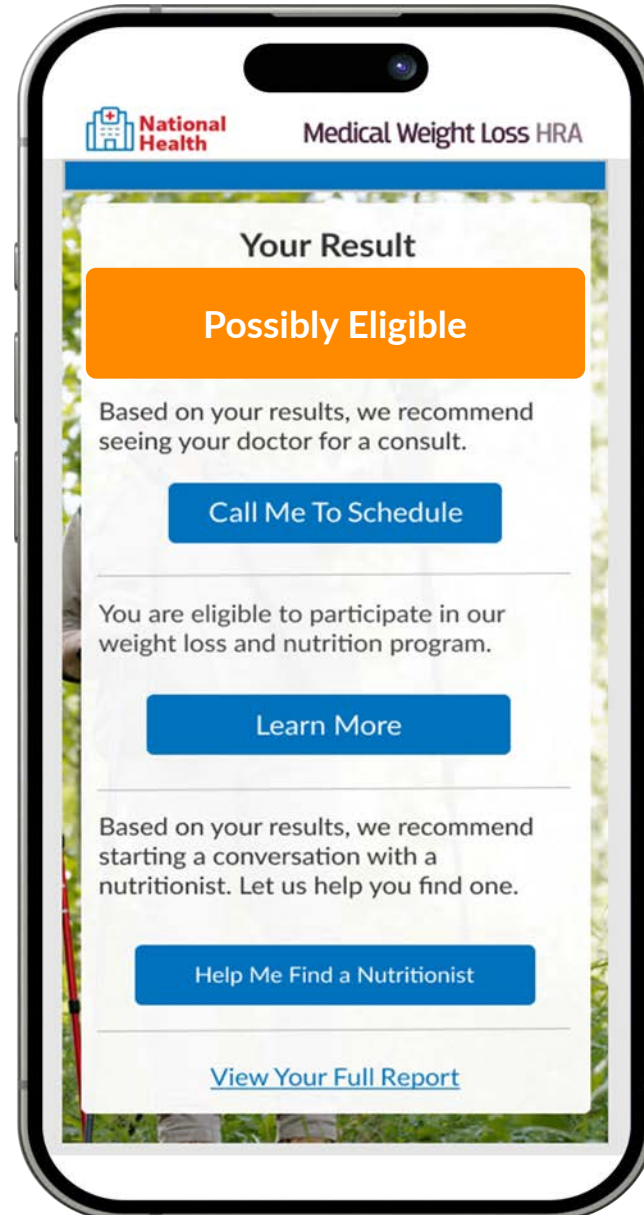
POSSIBLY ELIGIBLE

People in this category have the following:

- a body mass index (BMI) of 27.0 to 29.9
- AND-
- a weight-related comorbidity
- AND-
- **do not** report any of the following:
 - history of pancreatitis
 - gallbladder disease
 - diabetic eye disease
 - kidney or liver disease
 - personal or family history of thyroid cancer (MTC) or MEN2
 - pregnant, breast feeding or planning pregnancy
 - planning surgery or anesthesia in the next 2 weeks
 - type 1 diabetes

For the purposes of this recommendation, weight-related comorbidities include the following health conditions:

- High blood pressure
- Abnormal cholesterol
- Prediabetes or high blood sugar (type 2 diabetes is likely eligible, regardless of other conditions or BMI)
- Cardiovascular disease
- Debilitating arthritis
- Obstructive sleep apnea
- Gastroesophageal reflux disease (GERD)
- Nonalcoholic fatty liver disease
- Polycystic ovarian syndrome (PCOS)



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of console on:

- Scheduling an appointment to determine biometric values (BP, cholesterol, blood sugar).
- Having annual checkups.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and inquire about their routine health-care schedule.
- Explain that weight-loss medication eligibility depends on many factors which only a doctor can evaluate.
- Encourage an appointment to check biometrics and review eligibility for medical weight loss.



NURTURING

Customize your nurturing content to explain:

- The positive impact even a small weight loss can have on their overall health.
- That weight management plans may include a combination of therapies or behaviors, including staying active, lowering stress, taking medication, or having surgery.
- The availability of individualized treatment plans for weight management based on their needs and lifestyles.



PRIMARY CARE FOLLOW-UP

- Health conditions management and/or medication support.
- Quality of life greatly impacted by weight (mental health evaluation).
- Smoking or low weekly exercise (behavior-specific programs).



EXAMPLE PERSONA

Angela is 38 years old. Over the past decade, her weight has gradually increased as her job became more sedentary and family responsibilities grew. She is 5'4" and weighs 169 pounds (BMI 29).

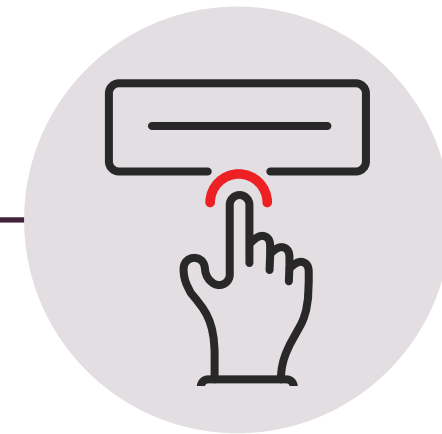
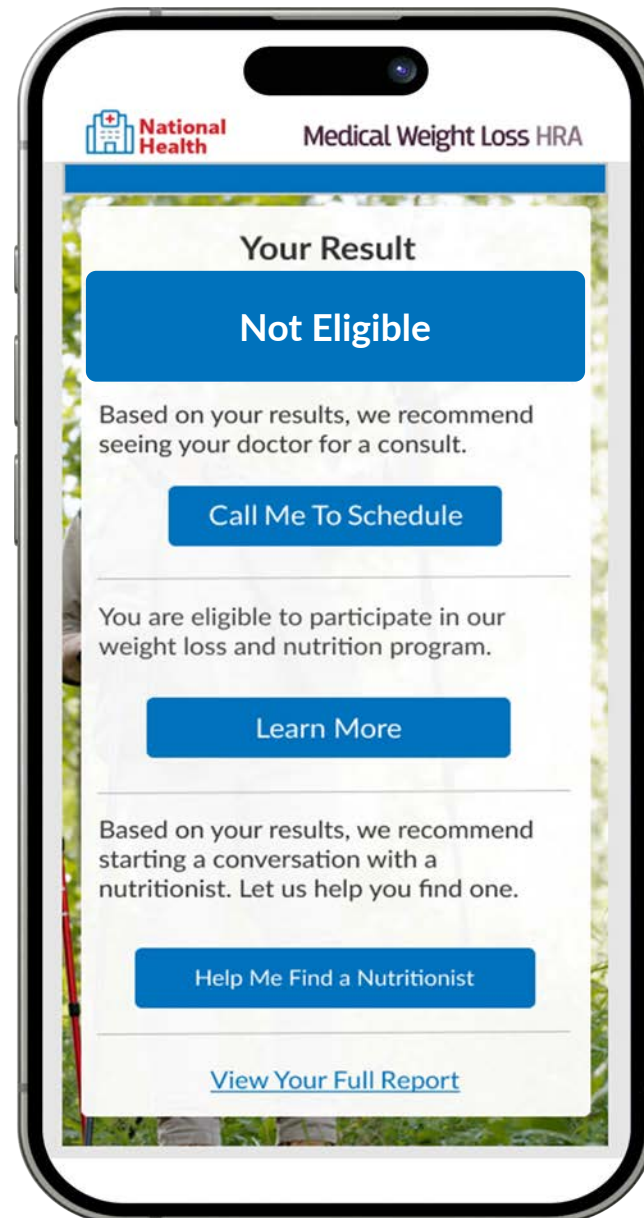
Angela has high cholesterol and her blood sugar has been in the prediabetes range. She feels generally healthy but is concerned about her long-term risk for developing type 2 diabetes and heart disease.

She has tried improving her diet and increasing physical activity, but her results have been inconsistent. Angela is interested in learning whether GLP-1 medication could help support her weight and metabolic health, but understands that a healthcare provider will need to review her situation to determine the best next step.



MEDICAL WEIGHT LOSS HRA

GOAL: REVIEW LIFESTYLE RISK FACTORS DURING REGULAR PRIMARY CARE VISIT



CUSTOMIZED CALL-TO-ACTION MESSAGES

Focus Call to Action (CTA) messaging in the follow-up section of console on:

- Having annual checkups.
- Scheduling an appointment.



FOLLOW UP

Follow up with the user as soon as possible to:

- Review the results report with them and discuss their weight-loss recommendation.
- Encourage sharing their results with their primary care physician at their next visit.



NURTURING

Customize your nurturing content to explain:

- The positive impact even a small weight loss can have on overall health.
- The availability of individualized weight-loss plans based on needs and lifestyles.
- The importance of “knowing their numbers” (BP, cholesterol, blood sugar) in addition to their weight.



PRIMARY CARE FOLLOW-UP

Refer people with the following profiles to other services lines, as appropriate:

- Quality of life greatly impacted by weight (mental health evaluation).
- Smoking or low weekly exercise (behavior-specific programs).

NOT ELIGIBLE

People in this category have the following:

- a body mass index (BMI) of less than 27.0
- OR-
- a body mass index (BMI) of 27.0 to 29.9 but **do not** report a weight-related comorbidity
- OR-
- **do** report any of the following (regardless of BMI):
 - history of pancreatitis
 - gallbladder disease
 - diabetic eye disease
 - kidney or liver disease
 - personal or family history of thyroid cancer (MTC) or MEN2
 - pregnant, breast feeding or planning pregnancy
 - planning surgery or anesthesia in the next 2 weeks
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EXAMPLE PERSONA



Marco is 29 years old. He has always been active and maintains a relatively stable weight. He is 5'9" and weighs 183 pounds (BMI 27).

Marco does not have any weight-related health conditions, but he recently explored GLP-1 medications after hearing about them from friends. He also reports a history of gallbladder disease, which makes some medications unsafe for him.

While GLP-1 medication is not recommended, Marco is open to other ways to support his health and maintain a healthy weight, such as nutrition guidance and lifestyle-focused programs.