



Request to Preserve Obesity Treatment Benefits in Colorado's State Employee Health Plan

January 28, 2025

Senator Jeff Bridges, Chair
Colorado Joint Budget Committee
200 E 14th Ave #300
Denver, CO 80203

Dear Senator Jeff Bridges and Members of the Colorado Joint Budget Committee,

On behalf of the American Medical Women's Association (AMWA), a national organization dedicated to improving the health of women, I am writing to express concern over the proposed elimination of obesity treatment benefits from the State Employee Health Plan (SEHP). We urge the committee to reconsider this decision and preserve these essential benefits.

Obesity is a chronic, multifactorial disease with significant medical, social, and economic impacts. It is linked to serious comorbid conditions such as diabetes, heart disease, hypertension, and certain cancers—conditions that account for a substantial portion of healthcare costs. The World Health Organization and the American Medical Association recognize obesity as a disease requiring evidence-based treatment, including access to obesity medications, behavioral therapy, and nutritional counseling. Removing coverage for these services will not only hinder the health outcomes of thousands of Colorado state employees but will also result in increased long-term healthcare costs as untreated obesity progresses to more severe complications.

While we recognize the financial pressures facing the state and the importance of addressing budgetary constraints, cutting obesity treatment benefits represents a short-term solution that will exacerbate long-term economic and health burdens. According to research, funds spent on obesity prevention and treatment yield significant savings by reducing the incidence of related chronic diseases and associated healthcare expenditures. Furthermore, access to obesity treatment empowers individuals to take control of their health, improves workforce productivity, and reduces absenteeism—benefits that extend far beyond the healthcare system. Studies have shown that when access to obesity medications, particularly GLP-1s, is discontinued, patients experience increased rates of weight regain and may turn to compounded formulations of these medications, which are not FDA-regulated, posing potential safety risks.

The decision to delay the removal of benefits to January 1, 2026, is a positive step, allowing for continued dialogue and consideration. We urge the committee to evaluate the long-term impacts of this proposal and explore alternative cost-saving measures that do not compromise the health and well-being of state employees.

We are available to provide support as you deliberate this critical issue. Protecting access to obesity treatment is not only a matter of public health but also a matter of equity. Colorado has an opportunity to lead by example in addressing the obesity epidemic with compassion and evidence-based policy.

Thank you for your time and consideration. Please feel free to contact me if we can be of assistance.

Sincerely,

Eliza Lo Chin, MD, MPH
Executive Director, American Medical Women's Association

Bcc: Colorado Joint Budget Committee Members