



The obesity rate is unprecedented and one of the costliest epidemics in the U.S.

By 2030, it is estimated that **50% of the population** will be obese.¹

Obesity is a contributing factor to other complex conditions, including diabetes and cardiovascular disease.

These three interconnected diseases, commonly referred to as cardiodiabesity, represent about \$838B in annual health care costs.²



of new diabetes cases in the U.S. could be prevented by reducing the prevalence of obesity.²

900K+

deaths are caused by heart disease every year.³



of Americans are obese.4

The GLP-1 trend and what lies ahead

GLP-1s have become a hot topic in the news and on social media. This skyrocketing trend can be attributed to GLP-1 effectiveness in treating diabetes, on-label use for weight loss and the rise of off-label use for weight loss.

GLP-1s help control blood sugar levels for people with type 2 diabetes. They can also help those managing obesity and have been shown to significantly reduce the risk of cardiovascular events.⁵ However, for those seeking to use GLP-1s for obesity, they can be cost prohibitive.

What are GLP-1s?



Glucagon-like peptide-1 receptor agonists, commonly known as GLP-1s, are a class of drugs that mimics a hormone released in the intestines after a meal. Its effects have impacts on feelings of fullness and appetite.⁶

As clients grapple with changing market dynamics, they will need help expanding GLP-1 coverage and affordability for their members, giving clients greater control over trend and spend.

With that in mind, clients need optionality and predictability for this driver of high pharmacy costs that could hinder their ability to provide health care benefits to their members.



Recently, traditional spending outpaced specialty drug spend for the first time, due to increased GLP-1 use.⁷ The annual growth rate for traditional drugs grew from 2.1% in 2021 to 12.8% in 2024.⁷ We know that this trend will continue as more GLP-1 indications come to market.



J.P. Morgan Research forecasts that the GLP-1 market will exceed \$100B by 2030, driven equally by use for diabetes and obesity.8

Evernorth EncircleRx: Cardiodiabesity

A groundbreaking solution unlocking greater GLP-1 control

Evernorth EncircleRxSM: Cardiodiabesity Weight Loss solution gives plans more optionality when managing cardiodiabesity. GLP-1 management is a key component in this strategy, and our perseverance with pharma is enabling us to provide an industry-first GLP-1 financial guarantee to our valued clients.

This program is designed to support the better overall health and wellness of plan members. Clients can choose what is best for their plan and enroll in a financial guarantee.

Our goal is to provide necessary GLP-1 coverage to the right patients while carefully controlling growth.

These enhanced controls ensure GLP-1 access to patients with a clinical need, improving outcomes and lowering downstream medical and prescription costs.

- + Higher patient BMI requirements, with consideration for documented comorbidities, ensure that GLP-1s are prescribed to patients who need them most to achieve a healthier weight.
- Enrollment and ongoing engagement in a lifestyle modification program, coupled with GLP-1s, provides patients the best outcomes in their weight loss journey.

To offer plans greater predictability (and control) of their GLP-1 spend for weight loss, we are excited to announce the first-ever GLP-1 financial guarantee available from a PBM.

This is available either through a cost cap or savings guarantee,* depending on client type and the BMI program below:

For clients that choose to require that patients have a **BMI of 32 or greater:**

- + Clients enrolled in the **Omada for Prevention program** who currently cover weight loss can implement a 15% cost cap.
- + Clients enrolled with **other vendors** who currently cover weight loss can implement a 3:1 savings guarantee.
- + Clients who **do not currently** cover weight loss will be able to implement a 3:1 savings guarantee.

For clients that choose to require that patients have a **BMI of 35 or greater:**

+ Clients who either currently cover or do not currently cover weight loss can implement a 3:1 savings guarantee.

GLP-1 ANTI-FRAUD PROTECTION PROGRAM

Appropriate prescriber and pharmacy management

We align these core patient touchpoints with patient outcomes to ensure appropriate prescribing, filling and adherence through increased monitoring and fraud prevention.

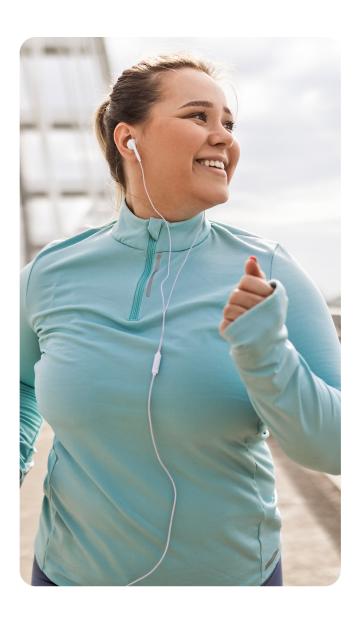
Click menu below to learn more.



Deeper discounts within EncircleRx for GLP-1s

Leveraging Express Scripts' supply chain expertise, plan sponsors enrolled in **EncircleRx will save up to 20% per GLP-1 prescription.** And, unlike our competitors, we worked with Novo Nordisk and Eli Lilly to deepen this discount without any formulary exclusions, preserving patient access and choice of the medicine that works best for them.

For plans seeking the lowest net PMPM trend, the existing EncircleRx program remains the preferred option for maximizing savings and clinical outcomes for patients taking GLP-1s.



Manage trend and utilization while lowering costs and improving outcomes

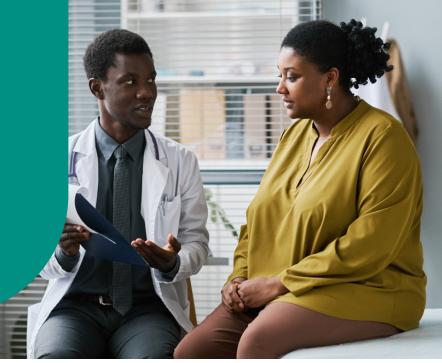
EncircleRx: Cardiodiabesity Weight Loss Cost-Share gives clients a new pathway to covering weight loss within the pharmacy benefit. This is a unique offering within the EncircleRx suite that leverages enhanced utilization management, allowing plan sponsors the choice to increase the patient cost share to \$200 per 30-day prescription.

EncircleRx: Cost-Share includes the following key components:

- + Client has the option to charge higher patient copay (\$200 per 30-day Rx) with Zepbound® exclusive offering.
- + Client enrollment in lifestyle modification program of their choice.
- + GLP-1 Anti-Fraud Protection is provided.
- + Enrollment in Evernorth EnReachRXSM is required.
- + Financial guarantees are not available.

Many Americans struggle with obesity, diabetes, cardiovascular disease or a combination of all three.

Managing GLP-1s for weight loss is just one component of EncircleRx: Cardiodiabesity. Clients now have the control and optionality necessary to better protect their plan.



An insight-driven approach

A client-centered approach to managing the pharmacy benefit is more crucial than ever.

Evernorth® Health Services is improving performance by helping clients reach better outcomes with uniquely designed offerings that unleash the power of data and promote affordability.

Learn More



Ready to unlock a GLP-1 strategy to control growth and expand access for your plan?

Contact your account team for more information on enrolling.

*All Evernorth clients are eligible for a flat PMPM fee. Savings guarantee eligibility: Available to weight loss program clients with no previous GLP-1 coverage. There is no lives threshold. Cost cap eligibility: For existing Evernorth clients who are enrolled in the BMI ≥32 program. The cost cap is not available to clients enrolled in the BMI ≥35 program. Clients must have previous GLP-1 coverage and >1,000 lives. The cost cap is only applicable for year one of program enrollment. The 15% cost cap is only available to clients enrolled in the Omada for Prevention program.

1. Ward ZJ, Bleich SN, Cradock AL, Barrett JL, et al. "Projected U.S. State-Level Prevalence of Adult Obesity and Severe Obesity." New England Journal of Medicine. 2019; 381:2440–2450. doi: 10.1056/NEJMsa19093 2. American Heart Association. "Up to half of new diabetes cases in the U.S. linked to obesity" [Press release]. February 10, 2021. https://www.heart.org/en/news/2021/02/10/up-to-half-of-new-diabetes-cases-in-the-us-linked-to-obesity 3. American Heart Association. "Heart Disease and Stroke Statistics - 2023 Update." January 25, 2023. https://professional.heart.org/en/science-news/heart-disease-and-stroke-statistics-2023-update 4. Emmerich SD, Fryar CD, Stierman B and Ogden CL. "Obesity and Severe Obesity Prevalence in Adults: United States, August 2021–August 2023." Centers for Disease Control and Prevention (CDC). Last reviewed September 24, 2024. https://www.cdc.gov/nchs/products/databriefs/db508.htm 5. Evernorth Research Institute, 2023. 6. Food and Drug Administration (FDA). "Medications Containing Semaglutide Marketed for Type 2 Diabetes or Weight Loss." Via Utah.gov. Last accessed March 11, 2025. https://www.utah.gov/pmn/files/992925.pdf 7. Evernorth Health Services, (2025). Pharmacy in Focus: Navigating the GLP-1 conundrum. 8. J.P. Morgan. "The increase in appetite for obesity drugs." November 29, 2023. https://www.jpmorgan.com/insights/global-research/current-events/obesity-drugs

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