

found

State of Weight Care Report

2023



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Executive Summary

Found's inaugural "State of Weight Care" report equips benefit leaders, workforce employees, and individuals wanting to improve their health with the insights they need to make clinically responsible decisions related to weight management.

Weight loss trends in 2023

The year 2023 brought a sea change in the public's understanding of weight management—from the viral popularity of weight-care treatments and the resulting drug shortages to the potentially high costs that impact employers and those seeking treatment. And 2023 has also given more people renewed hope that they can finally achieve the health they seek—and improve the quality of their lives.

Pop-culture popularity of medications

Medication has dramatically changed the conversation about weight. Ozempic® use, in particular, has become a trend among Hollywood celebrities, fueling public interest in the drug. (The hashtag #Ozempic has amassed over 1.2 billion views and counting on TikTok.)

GLP-1s, or glucagon-like peptide-1 receptor agonists, are a class of medications that have been used to treat diabetes and are now being used to treat obesity and excess weight. In addition to Ozempic, other medications like Wegovy®, Saxenda®, and tirzepatide (commonly known as Mounjaro®, a GLP-1 + GIP, or glucose-dependent insulinotropic polypeptide) have also become increasingly more mainstream.

These medications are radically changing the weight care industry, bringing biology to the forefront of obesity conversations by delivering significant weight-loss results for many.

Rise in medication-assisted weight care

The silver lining to the current social media-fueled fad over weight loss medication is that we are also seeing a cultural shift in destigmatizing medically-assisted weight loss. Discussions around weight loss are becoming more common in public discourse. In turn, these conversations inform the understanding that obesity is a chronic disease driven by biology and not a moral failing.

Employers face coverage challenges

Consumers' experiences with GLP-1s are varied, with some eagerly awaiting a prescription for the touted "miracle weight-loss drug" and others unable or unwilling to begin weekly, and sometimes daily, injections costing upwards of \$1,600 a month. Most, if not all, benefits leaders remain cautious about the best approach to these new therapies—which may be both clinically effective for many of their employees and also come potentially astronomical impacts on the company's bottom line.

“

*It's time we start treating obesity like every other chronic disease, explains **Rehka Kumar, MD**. That starts with acknowledging that there are biological factors working against most people on their journey to lose weight, and until those biological factors are addressed, long-term weight loss is not likely to be successful.¹*

We hope that the "State of Weight Care" report will catalyze organizations to take thoughtful and considerate actions toward addressing weight management benefits in the workplace. The report will share industry insights from clinical leaders at Found, one of the largest weight clinics in the country, as well as survey data and learnings from 500 benefits leaders and 1,500 employees across America. And we will report on the weight care journeys of over 350 active Found community members.

About Found Health

Found is an evidence-based, comprehensive weight-loss solution that provides personalized treatment plans based on each individual's biology, including clinically prescribed medications. Rekha Kumar, MD, MS, Found's Chief Medical Officer and a former Medical Director of the American Board of Obesity Medicine, designed our clinical program. We've helped over 200,000 people with excess weight or obesity. Found is a member of the Innovators' Network at the American Heart Association's Center for Health Technology & Innovation.

Found Health also provides:

- Access to a wide range of prescription medications, including GLP-1s and other alternatives.
- One-on-one consultations with board-certified clinicians trained in weight care.
- Treatment designed around each person's unique biology.
- A program designed by leading experts in obesity medicine.
- A Found-led insurance verification process for GLP-1s.
- An in-app community of members for peer support.
- Access to health coaches for personalized lifestyle guidance.



Dr. Kumar is a globally recognized leader in obesity medicine and a practicing endocrinologist and obesity medicine specialist in New York City. As Found's Chief Medical Officer, she designed our clinical and behavior change programs and trains Found-affiliated providers. She currently sits on the Board of Directors of the Duke Global Health Institute and is an Associate Professor at Weill Cornell Medicine. Dr. Kumar is a former Medical Director of the American Board of Obesity Medicine. The media frequently quotes Dr. Kumar on topics ranging from the diabetes epidemic in the United States to fad diets and exercise trends.

● **Dr. Rekha Kumar,**
Found Chief Medical Officer

What is obesity?

The Obesity Medicine Association defines obesity as a “chronic, relapsing, multi-factorial, neurobehavioral disease, wherein an increase in body fat promotes adipose tissue dysfunction and abnormal fat mass physical forces, resulting in adverse metabolic, biomechanical, and psychosocial health consequences.”²

Decades of research show that weight loss is more complex than “eat less, move more.” In fact, a range of biological, psychological, and environmental factors play a role in the disease of obesity.

For many people, obesity is an inherited condition. There are over 300 genes associated with the disease³, according to the Obesity Medicine Association, and the rate of inheriting a high BMI is between 40% and 70%. For others, abnormal hormone function, including insulin resistance, diseases like depression and PCOS, and even environmental factors and poor sleep contribute to obesity.

What is weight care?

At Found, we use the term “weight care” to describe the personalized, ongoing treatment we provide our members.

Because obesity is so complicated—and often recurring—people need ongoing care by a clinician who can provide personalized treatment and also adjust treatment along each person’s journey. Care doesn’t end when a weight goal appears on the scale.

Weight care acknowledges that effective treatment is ongoing, and addresses the whole person—their biology, medical history, mental health, lifestyle, culture, and goals.



73.7%

73.7% of U.S. adults (age 20 and over) have excess weight or obesity.⁴

42.4%

More than 2 in 5 adults (42.4%) have obesity (BMI 30+).

9.2%

About 1 in 11 adults (9.2%) have severe obesity (BMI 40+).

30%

Additionally, nearly 1 in 3 adults (30.7%) clinically have excess weight (BMI 25–30).⁵

26%

Between 2008 and 2018, the national adult obesity rate increased by 26%.

35%

Obesity rates continue to grow: In 2021, nineteen states had adult obesity rates over 35%. Before 2011, zero states had an adult obesity rate at or above 35%.⁶

How employers strive to meet the demand for weight care

With increased public awareness of available medications and their success in assisting weight loss driving demand, the pharmaceutical industry experienced supply shortages starting in spring 2022.⁷ Regardless of supply, individuals without insurance coverage pay high out-of-pocket costs for GLP-1s.⁸ And there are ongoing access issues for people with diabetes and people in marginalized communities.⁹

Employers are seeing significant increases, too, with individual benefits leaders reporting doubling, tripling, and even quadrupling prescription costs year over year, with drugs like Ozempic priced at \$10,000 or more annually.^{10,11}

According to the International Foundation of Employee Benefit Plans, 22% of United States employers cover prescription drugs for weight loss, and almost half (45%) cover bariatric surgery. 32% of organizations offer some form of a weight management program.¹²

The Data: Employers on benefits for weight loss

In July 2023, Found partnered with OnePoll, an international market research agency, to ask 500 benefits decision-makers at large companies (5,000+ employees) about their health benefit offerings and recent observations on benefit usage at their companies this year.



OnePoll Survey Methodology:

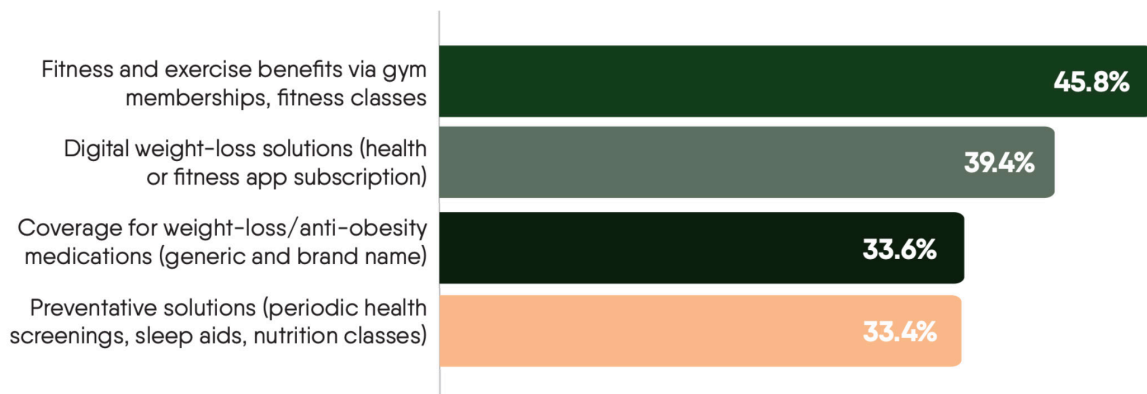
This randomized double-opt-in survey of 500 U.S. benefits decision-makers, commissioned by Found, occurred between August 2 and August 4, 2023. OnePoll, whose team members belong to the Market Research Society, is a corporate member of the American Association for Public Opinion Research (AAPOR) and the European Society for Opinion and Marketing Research (ESOMAR) and conducted the survey.



What companies offer now

We asked leaders about their companies' current weight management benefits or care programs. Given the availability and the perception that these are “perks” as much as health benefits, gym memberships and fitness class reimbursements continue to be the most popular types of weight management programs.

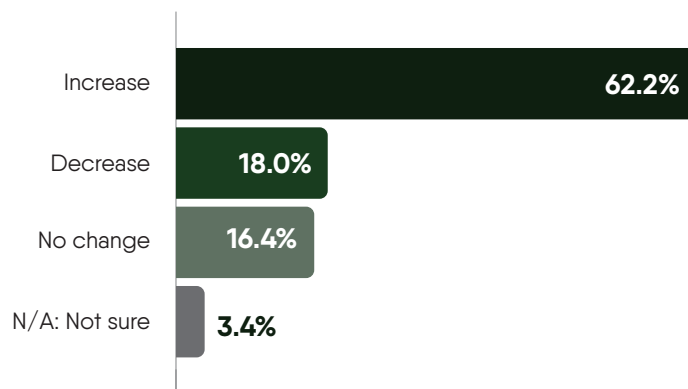
What are the weight health-related benefits your company currently offers to employees?



Source: Found Health survey by OnePoll, August 2023

The most significant impact within organizations is growing GLP-1 costs. Nearly two-thirds of benefits leaders noticed increased GLP-1 spending in the past year.

Have you seen or noticed an increase or decrease in spending on GLP-1s (Ozempic, Wegovy, etc.) within the company/employees in the past year?



Source: Found Health survey by OnePoll, August 2023

With only a third of organizations covering GLP-1s for weight loss, the trend in usage may be driven by the rising diabetes claims or off-label use for weight care.

Anecdotally, some employers report seeing a 400% increase in Ozempic prescriptions year over year—knowing demand for weight management likely propels this increase.

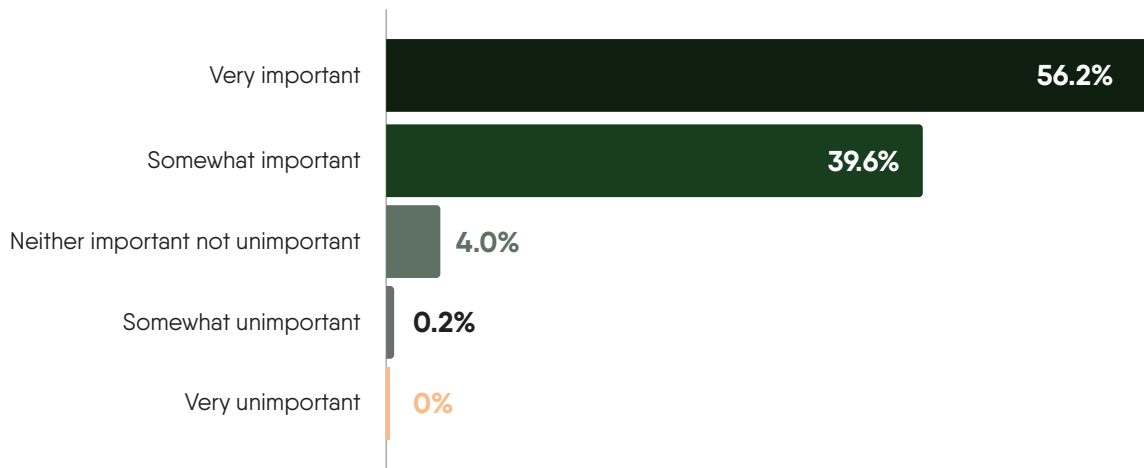
Exacerbating the issue is that employers can't respond by pulling the medications off their formularies for all indications and denying coverage for individuals who need them. Many of these medications are used to manage type 2 diabetes, and some GLP-1s are also used to reduce the risk of major adverse cardiovascular events.^{13,14} However, providing coverage for life-long prescriptions could easily cause financial stress to companies if not carefully managed.

Looking ahead: How employers plan to support weight management

The demand for weight-loss medication isn't going away. The global anti-obesity drugs market is projected to grow from \$4.51 billion in 2023 to \$22.85 billion by 2030.¹⁵ Companies must be prepared to provide cost-effective solutions. Today, an overwhelming majority of employers believe weight management is vital to preventative physical health care.

Many of the leaders we surveyed have plans to incorporate coverage for anti-obesity medications (AOMs) or at least some form of weight management programming as part of their benefits offering in the next 12 months.

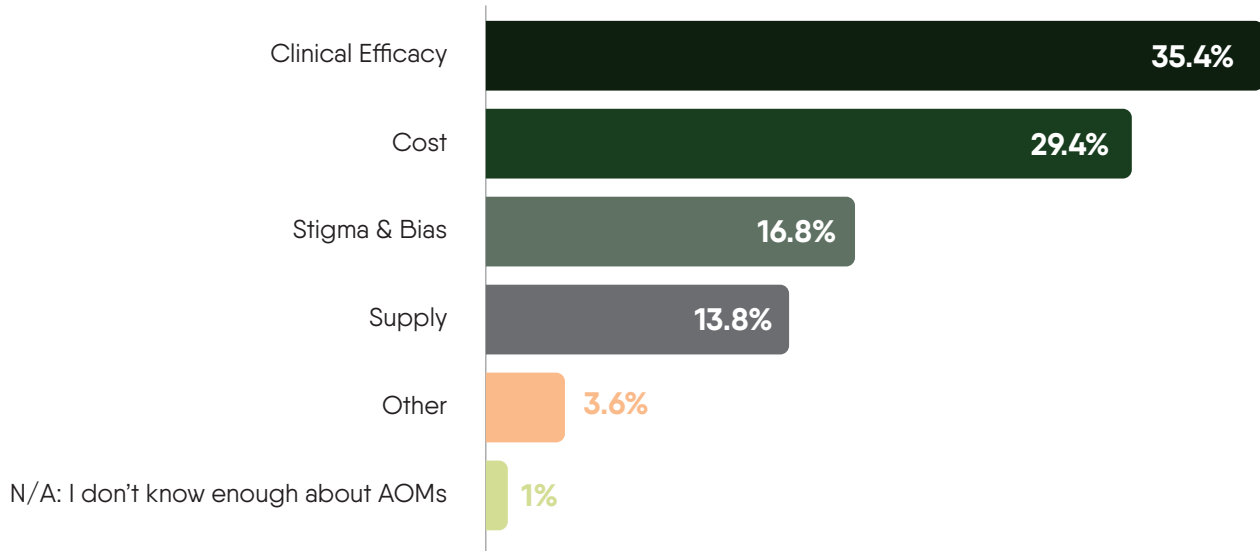
In your opinion, how important is weight management when it comes to preventative and physical health care?



Source: Found Health survey by OnePoll, August 2023

Those plans also come with a shared set of concerns and cause for hesitation. Over a third of employers are concerned about clinical efficacy—adherence to clinical practices, potential side effects, and impact of results. Nearly a third of employers are concerned about cost management. Other employers report concerns around stigma and supply, respectively.

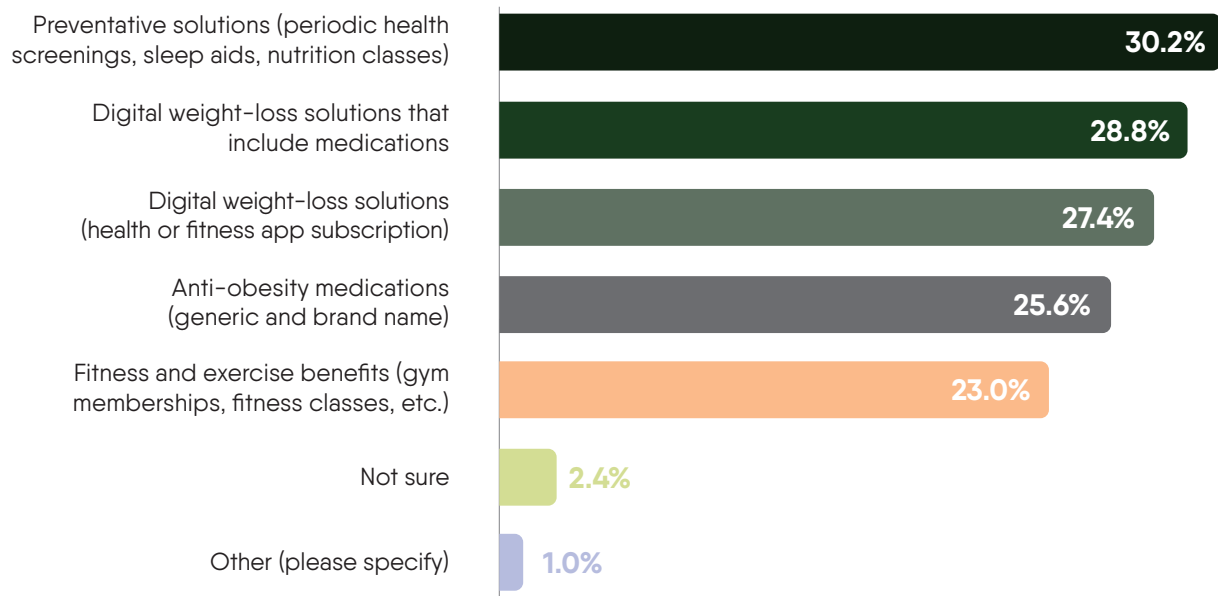
What is your biggest concern, if any, with AOMs?



Source: Found Health survey by OnePoll, August 2023

Companies are divided by the approach they may adopt to adequately manage concerns around clinical efficacy, rising costs, and the medication supply amid GLP-1 shortages. Nearly a third of companies surveyed plan to offer digital weight-loss solutions paired with medication, and a quarter plan to offer coverage of anti-obesity medications without a corresponding digital component.

What health benefits does your company plan to offer employees within the next 12 months? (Responders were allowed to choose more than one option.)



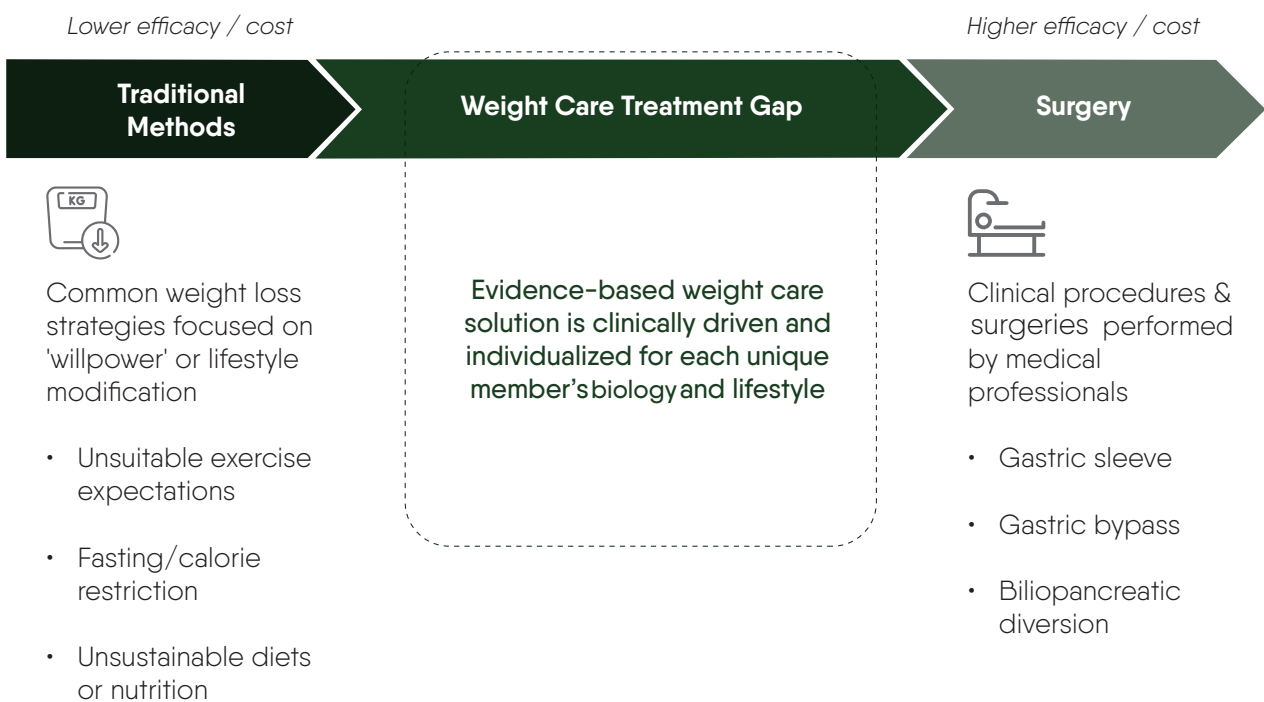
Source: Found Health survey by OnePoll, August 2023

Solutions for weight care

The question remains: What is available to individuals and employers that balances clinical efficacy (successful and sustainable weight loss) and total cost of care?

Primary care and generic wellness benefits have not been enough to address weight care needs as evidenced by the continuing obesity epidemic. There aren't enough obesity care-trained physicians to meet the impacted and at-risk population. Further, unlike other areas of medicine, even though a number of medical associations have their own set of clinical guidelines for obesity care, there is not yet one universally accepted protocol for treating obesity.

Among traditional weight-management solutions and programs, there is a notable treatment gap along the entire continuum of care. Currently, the most common solutions only address the extreme ends of the continuum. These include behavioral interventions that are effective only for individuals with lower acuity weight-loss needs and, on the other end of the spectrum, surgical interventions for those with persistent obesity.



Elements of Effective Care



01 Personalized Medicine



There is no one-size-fits-all weight-loss solution or choice of medication. As popular and effective as they are, GLP-1s are not a silver bullet for all. Clinics that only offer one class of drugs may provide a pharmaceutical solution. Still, without personalized treatment, they fail to deliver the critically needed advantage of managing care for a complex, persistent disease over the long term.

Not everyone responds successfully to GLP-1s because biology is highly individualized. Research suggests that up to 37% of the population may not reach clinically significant weight loss (≥5%) with GLP-1s because the drugs aren't the appropriate medication to address their unique biology and profile.¹⁶



*Medispas' and certain untrained physicians may liberally prescribe medications like Ozempic these days to people who don't meet the criteria for it," stresses **Rekha Kumar**, MD, Chief Medical Officer at Found. "That's not only irresponsible, but it also may not be the most effective option. That's something you should keep in mind before requesting it from your doctor."¹⁷*

GLP-1s should be **one** of many options within a comprehensive toolkit of medications where prescription decisions are made based on clinical efficacy and appropriateness and not by media-driven demand.

Prescribing the right medication is important. Found members, when asked how they would prioritize or value weight-care solutions if covered by their employers, 67%—most of whom have insurance through their employers—ranked anti-obesity medication coverage as the number one priority over gym memberships, wellness physicals, meal delivery kits, and flexible wellness dollars.

If your company covered any/all of the following weight care solutions, please rank the following options from most to least value

- #1 Weight loss / anti-obesity medication
- #2 Gym / Health Club memberships
- #3 Annual wellness physical
- #4 Healthy meal delivery kits
- #5 Flexible wellness dollars
- #6 Step competitions & fitness trackers
- #7 Wellbeing platforms (e.g., Virgin Pulse)
- #8 Access to nutrition or fitness apps (e.g., MyFitnessPal)

Source: Found Member survey, July 2023

The sentiment from Found's members mirrors a July 2023 KFF Health Tracking Poll on new prescription weight-loss drugs and prescription drug costs. (KFF is an independent source for health policy research and polling.) The poll found that most adults (80%) believe insurance companies should cover the cost of weight-loss drugs for adults with excess weight or obesity. More than half of adults surveyed (53%) think insurance should cover the cost of these drugs for anyone who wants to lose weight.¹⁸



How Found delivers personalized medicine

Found assesses each individual's root cause of obesity to personalize their program, including, if appropriate, medication therapy. Our clinicians use a proprietary diagnosis engine to determine each member's metabolic profile and design an efficacious treatment. Found offers more than GLP-1 medications: Providers work with a toolkit of 12 medications, including generics, that can be combined in 60 different ways to personalize care that meets the needs of a diverse range of individuals.

02 Comprehensive Programming



There is a need for a more robust and comprehensive standard of care that not only treats the biological root causes of obesity but also addresses comorbidities, nutrition, movement, mental health, and general well-being with personalized, guided behavior change.

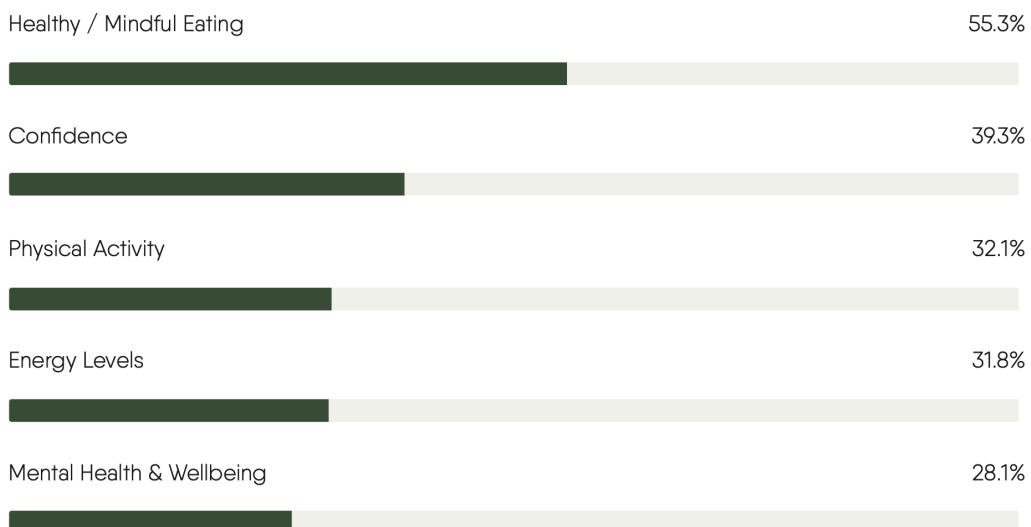
A study published in The New England Journal of Medicine showed that those who made lifestyle changes when taking a GLP-1 medication (liraglutide) for weight loss got better results than those in the placebo or lifestyle change groups. At the one-year mark, those who were prescribed exercise combined with the GLP-1 lost an average of about 21 pounds, compared to a nearly 15-pound average loss in the drug-only group and about a 9-pound average loss in the exercise-only group. The body fat percentage of those in the exercise-plus-medication group decreased about twice as much as for those in the drug-only and exercise-only groups.¹⁹

This clinical evidence is why many obesity medicine experts, including Dr. Kumar, consider lifestyle changes the cornerstone of lasting healthy weight loss and maintenance. Because factors like sleep, hydration, and stress can affect weight independently, she says, “people will see better results in their weight loss and maintenance if they can adopt healthier habits overall.”

It is not sufficient to offer a clinical solution and a behavior change program that are segregated from each other. Pairing a traditional behavior change program with non-integrated clinical capabilities risks delivering a disjointed employee experience with suboptimal clinical outcomes. Instead, the close integration of both of these approaches is needed. This integration ensures that the clinical team has a prominent voice in developing the behavior change program based on the unique needs of the patient.

In our survey, Found members noted a connection between weight loss and lifestyle improvements.

Which of the following (if any) have improved for you since joining Found?

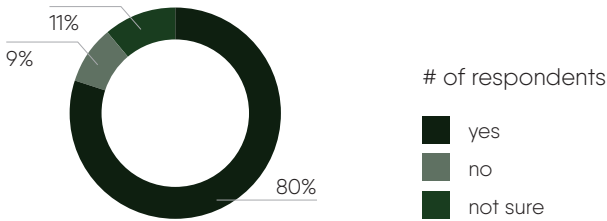


Source: Found Member survey, July 2023

And the results are even more compelling for Found members who have been in the program for 6+ months. Eighty percent of the surveyed members reported notable changes in adopting new and healthier habits:

Has the program helped you to adopt new behaviors or healthier habits?

Respondents 6+ months (n=100)

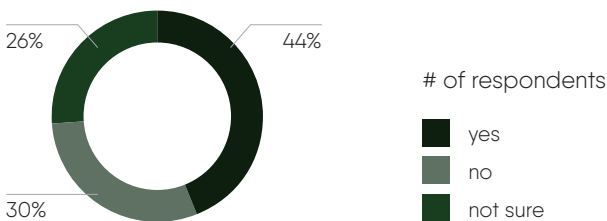


Source: Found Member survey, July 2023

When asked about their experience at work, 44% of individuals felt more productive during their workdays.

Do you feel that being part of the program helped improve productivity at work?

Respondents 6+ months (n=100)



Source: Found Member survey, July 2023



How Found delivers comprehensive programming

Found's clinical, product, coaching, and technical teams use a bio-psycho-social approach grounded in the most current scientific and clinical evidence to help members achieve long-lasting, sustainable weight loss. This comprehensive and personalized approach to weight care targets the biological causes of obesity. It provides behavioral support through coaching, a lifestyle change program designed by our medical and behavioral science teams delivered in a mobile app, and a thriving member community for peer support.



03 Obesity Expertise at Scale



As prevalent as obesity is in the U.S., less than 1% of physicians are certified obesity specialists in the U.S.^{20,21} There is optimism: diplomates of the American Board of Obesity Medicine currently represent the fastest-growing medical specialty in the U.S., according to Patient Care Online.²² Although the number of certified obesity specialists increased by 400% from 2011-2019, those physicians do not come close to meeting patient demand. Fewer than 4% of people with obesity have access to care from an obesity specialist.²³ The Obesity Action Coalition reports that “access to obesity treatments has become more restrictive over the last decade.”²⁴

Thankfully, the rise of telemedicine and the influx of digital health offerings have helped to increase access and affordability. However, within the saturated marketplace, organizations still struggle to find the right experts.

Among Found members, a weight-loss solution's second most important characteristic was access to an obesity medicine specialist.



How Found delivers obesity expertise

Found's internal training program addresses the limited number of American Board of Obesity Medicine (ABOM) trained providers available to most Americans. Our clinical leadership comprises experts in the obesity industry with decades of clinical experience caring for patients. Our clinical team attracts passionate clinicians, and our platform empowers them through training and technology.

04 Integration



For many individuals, excess body weight leads to chronic conditions downstream. As such, an effective weight management approach uniquely enables the performance of other condition-specific programs. Obesity significantly impacts overall health, increasing the risk of 236 other diseases (13 of them cancers) and decreasing lifespan by up to eight years.²⁵ Given weight's integral role in overall health, thoughtful connectivity (between or among) a weight management program and other supporting health programs can maximize program impact for employees.

For example, employees living with obesity who are also participating in a digital musculoskeletal (MSK) program may benefit from weight loss to further reduce joint or back strain. The coordination of eligibility and clinical care between a purpose-built weight management solution and the MSK solution in this example will create a more seamless employee experience and improve the outcomes of both programs.

We propose establishing clinical protocols and data exchange across employers' portfolios of relevant programs to assist in identifying clinically eligible employees and to deliver an integrated employee experience.



How Found delivers better integration

Found's impact on weight management can profoundly accelerate existing health benefit programs spanning conditions such as MSK health, diabetes, hypertension, and cardiovascular health. Our partnership approach is to create better integration and coordination to drive superior experience and outcomes. Found's engaging platform can be an access point where employees discover other programs (e.g., we can highlight the availability of an MSK program to a member active in our community for knee pain). We can also be integrated into other platforms to accept appropriate referrals (e.g., navigation solutions).

Moving forward

Weight care and managing one's weight are prevention-based health care. Growing awareness of powerful and costly therapies like GLP-1s has created a dynamic where all stakeholders—consumers, providers, employers, and payers—must ask how, not if, they'll engage in new approaches to weight care. For people living with obesity or clinically-defined excess weight, weight management is a complex issue that requires a whole-person approach to care, spanning nutrition, mental health, stress management, movement, sleep quality, and clinical interventions.

In the past, people have had programs that address these aspects of care, but rarely have they been deeply integrated as part of weight care.

When organizations and individuals can engage in programs based on the Elements of Effective Care, the outcome is a modern, next-generation benefit

that enables each person to get the personalized, advanced care they need for sustained weight loss success.

The health issues associated with obesity and weight are significant, but so are the opportunities to address this disease with new medications and a better understanding of what obesity is. All stakeholders stand to benefit from effective investments in weight management:

- Employers and payers can improve the health of their population and reduce downstream total costs of care;
- Providers can deliver clinically effective care to tackle one of the most prevalent chronic conditions with significant unmet needs and
- Consumers can significantly improve their everyday quality of life.



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