Optum

Bariatric Resource Services

Obesity: A common and costly problem

42% of adults in the U.S. are considered obese,¹ and this high-prevalence disease has serious health consequences. Obesity-related comorbidities include some of the leading causes of preventable death, like diabetes, heart disease, stroke and certain cancers. In addition, obesity leads to overall higher health care costs for employees and employers – up to 74% higher for severely obese adults.²

Obesity presents other challenges for employers, too. Obese adults miss 128% more work days per year compared to healthy-weight adults, which translates into an estimated \$27 billion in annual productivity loss in the U.S.³

The solution

Bariatric surgery is an effective way to address the long-term health risks associated with severe obesity. Surgery helps to improve or resolve many types of cancer, type 2 diabetes, hypertension, hyperlipidemia and sleep apnea in severely obese individuals.^{1.4} The Optum[°] Bariatric Resource Services (BRS) program offers a multidisciplinary approach to help lower total cost of care and support better health outcomes.

Bariatric surgery is only one tool on the journey to better health for obese employees, and not all bariatric programs are created equal. Strict dietary, exercise and lifestyle changes are essential to long-term success. The two pillars of the BRS program provide both the highest-quality clinical outcomes and the support to set members up for a healthier life post-surgery.

1. Centers of Excellence (COE) network

BRS provides support, education and resources from some of the top bariatric facilities and experts in the country. Our rigorously qualified COE network delivers improved clinical and economic outcomes through:

- Valuable contracts. Initial procedure costs and costs associated with complications are reduced.
- **Provider expertise.** Facilities are evaluated annually on cost and quality measures.

On average, surgical episodes completed at a COE cost \$3,092 less than those performed at other facilities. 5

Optum COEs also have fewer complications and readmissions⁶:

- 31% lower inpatient length of stay
- **39%** lower inpatient hospital readmission

The high cost of obesity:

\$173B

annual medical cost of obesity in the U.S.²

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41%

higher annual medical costs for obese adults²

74%

higher annual medical costs for severely obese adults²

\$4,100

excess annual medical costs per person from severe obesity²

All bariatric surgery COEs meet rigorous criteria for:

- Annual volume of surgeries
- Number and experience of surgeons
- Complications and mortality rate
- Certifications
- Length of program existence
- Multidisciplinary team

2. Specialized nurse case management

Optum nurse case managers have an average of over six years' experience in bariatric and an average of 20+ years of nursing experience. The support they provide to employees begins well before the surgery episode and includes post-surgery follow-up to reduce complications and ensure the best possible outcomes.

One-hundred percent of members in the program indicated satisfaction with BRS clinical case managers and 82% indicate better health outcomes by working with the program.7

Optum nationwide BRS COE network*



Nurse case management support system



To learn more, contact your **Optum sales representative.**

1-866-427-6845 engage@optum.com

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- Single facility in city/area
- Multiple facilities in city/area

* Facilities as of November 2022. Actual locations are subject to change

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- 2. Ward ZJ, Bleich SN, Long MW, Gortmaker SL. Association of body mass index with health care expenditures in the United States by age and sex. PLoS One. 2021; 16(3):e0247307.
- 3. Cawley J, Biener A, Meyerhoefer C, et al. Job absenteeism costs of obesity in the United States: National and state-level estimates. J Occup Environ Med. 2021; 63(7)565-573.
- 4. American Society for Metabolic and Bariatric Surgery. Obesity in America fact sheet. July 2021. Accessed December 7, 2022.
- 5. Optum Bariatric Resource Services Value Measurement. UHC commercial population including Fully Insured and ASO members. January 1, 2018 to December 1, 2020. Analyzed 2021.
- 6. Crossman A. UHC commercial surgeries (2020), analyzed in 2022. Cost expressed in episodic derived allowed.
- 7. 2021 Optum Consumer Net Promoter Score survey results.

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