Condition snapshots

For the tens of millions of Americans living with chronic or metabolic conditions, the health system can seem extra confusing, costly and complex. Take a closer look at the latest condition-specific trends and impacts, as well as benefits strategies employers can use to help simplify the care experience, support more informed employee choices and control costs.

Cancer >

Musculoskeletal disorders >

Cardiovascular disease >

Digestive disorders >

Behavioral health >

Diabetes >

Obesity >

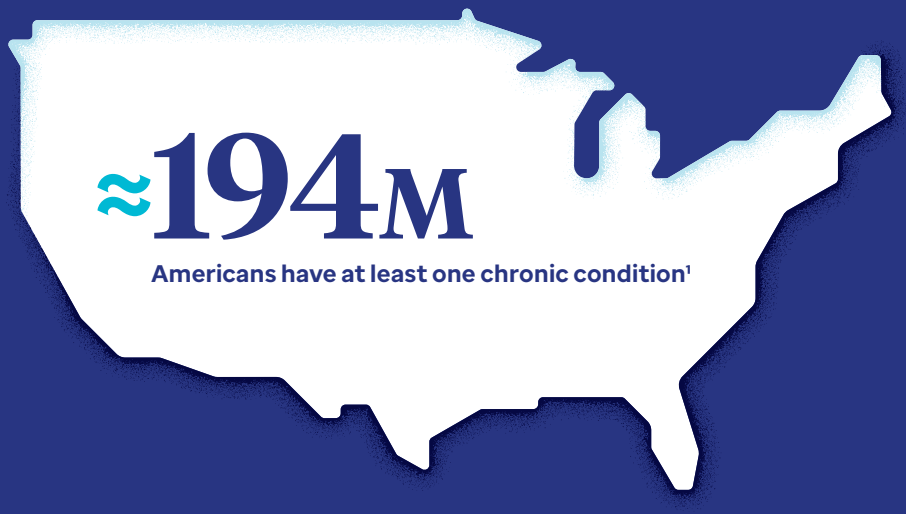
United Healthcare®

Introduction >>

Managing big employee health challenges: What employers can do

"At UnitedHealthcare, we're striving to reach members newly diagnosed with chronic disease sooner in order to make a difference earlier."

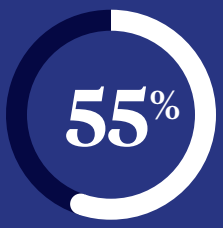
Dr. Rhonda Randall
Chief Medical Officer
UnitedHealthcare Employer & Individual



Employers are feeling the impact:

of employer health spend driven by chronic conditions[2]

≈20% of members drove 80% of employer health spend due to chronic and comorbid conditions[3]



55% of surveyed employers ranked chronic condition management as the No. 1 area that could benefit most from innovation[4]

While cancer, musculoskeletal conditions and circulatory (cardiovascular) issues remain the costliest conditions for employers, metabolic conditions such as obesity and diabetes can increase the risk of other conditions, as well as exacerbate pre-existing conditions. In fact, 31% of UnitedHealthcare members with metabolic conditions drove 57% of total health care spend.[2]

On top of that, other conditions are emerging and contributing to the cost pressures employers are facing. The good news for employers is that a more informed approach to their health benefits strategy may help:

- **Spot risks and diagnose these conditions sooner,** when they may be easier and less costly to treat
- **Encourage more preventive care and wellness** to help employees get and stay healthier
- **Better support employees with chronic conditions** through integrated benefits and clinical programs that can enable more coordinated care and better medication adherence

Continue to the snapshots >>

[1] Watson, K. et al. Trends in Multiple Chronic Conditions Among US Adults, By Life Stage, Behavioral Risk Factor Surveillance System, 2013-2023. Centers for Disease Control and Prevention, April 17, 2025. Available: https://www.cdc.gov/pcd/issues/2025/24_0539.htm.

[2] UnitedHealthcare Employer & Individual internal data based on claims incurred between Nov. 1, 2023-Oct. 31, 2024 and Nov. 1, 2024-Oct. 31, 2025.

[3] Smithberg, K. Just 1% Of Employees Drive Nearly A Third Of All Health Care Spending. Word&Brown, Sept. 9, 2025. Available: https://jrreport.wordandbrown.com/2025/09/09/just-1-of-employees-drive-nearly-a-third-of-all-health-care-spending/.

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United Healthcare

Condition Snapshot

Cancer

As the number of cancer cases and associated costs keep climbing, care that treats the whole person becomes more critical.

Definition

- A group of diseases that cause abnormal cells to grow out of control

Trend

- 17 types of cancer are becoming more prevalent among adults under 50 years of age[2]
- ≈2M new cases of cancer are diagnosed each year[2]
- 75% increase predicted in breast, lung and colon cancer diagnoses between 2022–2050[3]

Causes[4]

- Genetics/ family history
- Obesity
- Tobacco and alcohol use

1 in 3

people in the U.S. are affected by cancer[1]

"Cancer's impact is devastating — touching patients, families, friends and employers. That's why prevention and early detection are critical."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

A metastasizing crisis

From costly treatments to a wide range of associated side effects, cancer impacts many lives in many ways.

Who

Most common in:[5]

Females

1946–1964

Baby Boomers
(born between 1946–1964)

Most prevalent in:[6]

1. **Maine and Oregon – 11.1%**
2. **Florida – 10.5%**
3. **Delaware – 10.4%**
4. **Montana – 10.1%**
5. **Ohio – 9.8%**

Find your state →

How

Physical impacts such as pain, fatigue and nausea – both from the disease itself and side effects of treatment

Mental health issues such as anxiety, depression, fear and feelings of isolation

Financial strain due to medical costs and potential loss of income

continued

How much

$63.57

average per member, per month care costs[5]

↑10.9%

increase in year-over-year average cost per member, per month[5]

Expected to comprise

30%

of employer health spend by 2027[7]

Strategies for employers

Taking a whole-person approach to health benefits may help support those already diagnosed and help other employees better prevent the disease in the first place.

Offer cancer care support services: Touchpoints with oncology nurses about treatment plans, and support for oral and infused medications, streamlined prior authorization process and additional **resources** may help address long-term needs.

Encourage regular cancer screenings: Regular cancer screenings have been found to prevent 4.75M deaths related to breast, cervical, colorectal, lung and prostate cancers.[8] Employers can work with their carrier on regular communications that encourage these screenings (often available for $0) or by offering at-home or on-site screenings.

Promote healthier lifestyles: Incentive-based programs that offer rewards for completing healthy activities may help employees make healthier choices, which may reduce their cancer risk. And self-help apps like **Calm Health** may help employees manage the mental health burden that may accompany a cancer diagnosis.

Provide access to quality facilities: The UnitedHealthcare Centers of Excellence (COE) network includes 40 leading cancer centers, which meet strict criteria based on their multidisciplinary approach to care, treatment planning and coordination, clinical research and more.

Learn how UnitedHealthcare supports a whole-person health approach >

United Healthcare®

[1] What is Cancer: American Cancer Society, March 31, 2025. Available: https://www.cancer.org/cancer/understanding-cancer/what-is-cancer.html.

[2] Ducharme, J. The Race to Explain Why More Young Adults Are Getting Cancer. Time, Feb 13, 2025. Available: https://time.com/7213490/why-are-young-people-getting-cancer/.

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Cancer Support Program is a program, not insurance. Availability may vary on a location-by-location basis and is subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. Please check with your UnitedHealthcare representative.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Calm Health is not intended to diagnose or treat depression, anxiety, or any other disease or condition. If participants feel their condition is severe and needs attention, they are instructed to contact their treating provider or mental health therapist for help. Employee benefits including group health plan benefits may be taxable benefits unless they fit into specific exception categories. Please consult with your tax specialist to determine taxability of these offerings.

The Centers of Excellence (COE) program providers and medical centers are independent contractors who render care and treatment to health plan members. The COE program does not provide direct health care services or practice medicine, and the COE providers and medical centers are solely responsible for medical judgments and related treatments. The COE program is not liable for any act or omission, including negligence, committed by any independent contracted health care professional or medical center.

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Condition Snapshot

Musculoskeletal disorders

Musculoskeletal (MSK) disorders are a leading cause of disability worldwide,[1] but a whole-person approach to managing these conditions may help ease the pain and boost productivity.

Definition

- Limitations in mobility and dexterity caused by pain, stiffness and/or swelling in muscles, bones, joints and connective tissues

Trend

- 1M workplace injuries in the U.S. attributed to MSK annually[3]
- $20B in annual workers' compensation claims are due to MSK[3]

Causes[4]

- Bone, joint and muscle injuries
- Other chronic conditions, such as arthritis, connective tissue diseases and osteoporosis
- Overuse, frequent exertion and repetitive motion

40%

of U.S. adults experience MSK conditions[2]

"Supporting musculoskeletal health in the workforce isn't just about compassion — it's a smart investment in the well-being and productivity of every team member."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

Growing pains

More and more Americans are living with MSK conditions that significantly impact mobility, quality of life and ability to work.

Who

Most common in:[5]

Females

1946–1964 **Baby Boomers** (born between 1946–1964)

Most common diagnoses among UnitedHealthcare members:[5]

1. **Back pain**
2. **Osteoarthritis**
3. **Other tissue conditions**

How

Physical impacts including chronic pain, mobility limitations, fatigue and sleep disruption

Common comorbidities and side effects include mental health issues, such as anxiety and depression,[2] obesity[6] and potential pain medication misuse or dependencies

Financial strain due to medical and medication costs, absenteeism and early retirement

continued

How much

$45.73

average per member, per month care costs[5]

↑9%

increase in year-over-year average cost per member, per month[5]

$381B

estimated annual medical expenses of U.S. adults with MSK conditions[2]

Strategies for employers

The challenges posed by chronic MSK conditions are significant. The good news is that employers can use effective whole-person health strategies for managing MSK that can both help improve employee health and control costs.

Provide access to specialized support: Physical and occupational therapy, chiropractic support and digital offerings (available through **UHC Hub®**) can offer targeted support.

Offer advocacy support: Advocates can help educate members about less-invasive treatment options, support medication adherence and help them find quality, cost-effective providers.

Evaluate surgical care options: Ensuring that employees who need surgery have access to ambulatory surgery centers and Centers of Excellence (COE) within their network may lead to quality health outcomes and reduced costs.

Equip and educate your workforce: Offering educational content, ergonomic support and access to an office gym (or a discounted gym membership) may help reduce risk factors, such as obesity and poor posture.

Promote healthier choices: Programs that allow employees to earn rewards for walking, cycling, tracking sleep and more may help strengthen their body and prevent or lessen the impact of MSK issues.

Learn how UnitedHealthcare supports a whole-person health approach >

United Healthcare®

[1] Musculoskeletal health. World Health Organization, July 2022. Available: https://www.who.int/news-room/fact-sheets/detail/musculoskeletal-conditions.

[2] The State of Musculoskeletal (MSK) Care Report. Hinge Health, January 2025. Available: https://www.hingehealth.com/for-organizations/state-of-msk-report-2025.

[3] Uncovering Hidden Costs of Work-related MSDs. WorkCare, March 25, 2025. Available: https://workcare.com/resources/blog/hidden-costs-of-work-related-msds/.

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Advocate services should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through Advocate services is for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. Advocate services are not an insurance program and may be discontinued at any time.

Disease Management programs and services may vary on a location-by-location basis and are subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

The Centers of Excellence (COE) program providers and medical centers are independent contractors who render care and treatment to health plan members. The COE program does not provide direct health care services or practice medicine, and the COE providers and medical centers are solely responsible for medical judgments and related treatments. The COE program is not liable for any act or omission, including negligence, committed by any independent contracted health care professional or medical center.

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Condition Snapshot

Cardiovascular disease

As the No. 1 cause of death in the U.S.,[1] cardiovascular disease (CVD) has a major impact on the workforce. A strategic approach to health benefits may help lower risks and costs for employees and employers alike.

Definition

- A group of conditions impacting the heart and blood vessels, potentially leading to heart attack, stroke and diseases of the arteries and veins

Trend

- Nearly half of U.S. adults have some form of CVD[1]
- 1 in every 5 heart attacks are silent – the damage is done but the person is unaware of it[2]

Causes[3]

- Diabetes
- High blood pressure
- High cholesterol
- Lack of physical activity
- Obesity
- Poor diet
- Substance use

#1

cause of death in the U.S. since 1921[1]

"While we've seen major advances with our ability to treat cardiovascular disease, we still have a long way to go with prevention."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

Getting to the heart of the matter

As a leading cause of death and driver of emergency room visits, CVD significantly impacts both employees and employers.

Who

Most common in:[4]

Males

1946–1964

Baby Boomers
(born between 1946–1964)

continued

Most prevalent in:[5]

1. **West Virginia – 14.2%**
2. **Kentucky – 12.7%**
3. **Arkansas – 12.5%**
4. **Louisiana – 12.2%**
5. **Alabama – 11.9%**

Find your state →

How

Increased risk of conditions like stroke, heart failure, rhythm disorders, coronary artery disease complications and kidney disease[6]

Mental health issues such as depression and anxiety[7]

Financial strain due to medical costs and absenteeism

How much

$41.08

average per member, per month care costs[4]

↑9.4%

increase in year-over-year average cost per member, per month[4]

$361B

projected annual productivity losses due to cardiovascular conditions by 2050[8]

Strategies for employers

Employers that take a whole-person approach to their benefits may be able to better support employees living with heart conditions and help control rising health care costs.

Cover heart health management programs: Apps like Hello Heart (available via **UHC Hub®**) can help members track and manage blood pressure while supporting consistent medication adherence.

Address top cardiac conditions: Claims data can help identify whether there are opportunities to expand access to cardiovascular health management programs and condition-specific resources. For example, **UHC Hub®** offers access to vendors like Teladoc Health, which provides digital and virtual hypertension management support programs.

Create heart-healthy workplaces: Offer healthier snack and meal options, consider workplace wellness initiatives like walking programs, and promote screenings and preventive care like regular blood pressure checks to help identify risk factors sooner.

Reward healthy behaviors: Incentive-based programs can help motivate employees to live healthier lifestyles by allowing them to earn rewards for tracking blood pressure, completing cardiac screenings and more.

Learn how UnitedHealthcare supports a whole-person health approach >

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[1] Palaniappan, L. et al. 2026 Heart Disease and Stroke Statistics: A Report of US and Global Data From the American Heart Association, Jan 1, 2026. Available: https://www.ahajournals.org/doi/epub/10.1161/CIR.0000000000001412.

[2] Heart Disease Facts. Centers for Disease Control & Prevention, Oct. 24, 2024. Available: https://www.cdc.gov/heart-disease/data-research/facts-stats/index.html.

[3] Heart Disease Risk Factors. Centers for Disease Control & Prevention, Dec. 2, 2024. Available: https://www.cdc.gov/heart-disease/risk-factors/index.html.

[4] UnitedHealthcare Employer & Individual self-funded and fully insured data based on claims incurred between Nov. 2024–Oct. 2025, paid through Jan. 2026.

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[7] Depression and Heart Disease. Johns Hopkins Medicine. Available: https://www.hopkinsmedicine.org/health/conditions-and-diseases/depression-and-heart-disease. Accessed: June 20, 2025.

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Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

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Condition Snapshot

Digestive disorders

For employers, the fallout from digestive disorders can be difficult to digest. From rising care costs to lost productivity, gut health issues are impacting employer budgets – inside and out.

Definition

- A range of conditions that affect the gastrointestinal (GI) tract, which includes the esophagus, stomach, intestines, liver, pancreas and gallbladder

Trend

- 86% of GLP-1 users have experienced GI side effects[2]
- 37% increase in costs driven from digestive disorders from 2019–2025[3]

Causes[4]

- Alcohol consumption
- Genetic history
- Lack of physical activity
- Obesity
- Poor dietary habits
- Cigarette smoking

60–70M

Americans are affected by digestive diseases each year[1]

"The digestive health of employees can have a meaningful impact on workforce productivity and quality of life. Offering clinical programs and resources that help manage chronic conditions can lead to more supported and healthier employees."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

Digesting the details

Individuals with frequent GI symptoms have decreased productivity at work and a lower quality of life. More serious digestive disorders were associated with an even more significant impact on both employees and employers.[1]

Who

Most common in:[3]

Females

1946–1964

Baby Boomers (born between 1946–1964)

Colorectal cancer is the deadliest cancer for Americans under the age of 50, with the most cases in:[5]

1. **Kentucky**
2. **Louisiana**
3. **West Virginia**
4. **Alabama**
5. **Hawaii**

Find your state →

continued

How

Increased doctor appointments due to complex diagnostic and treatment journeys, which generated 35.4M office visits annually[1]

Mental health issues as gut health has been linked to depression and anxiety[6]

Financial strain due to affiliated medical costs and increased presenteeism or absenteeism that could have hindered productivity

How much

$34.31

average per member, per month care costs[3]

↑10.5%

increase in year-over-year average cost per member, per month[3]

$142B

in total health care expenditures generated by GI diseases each year[7]

Strategies for employers

Employers that take a whole-person approach to their benefits may help employees address the multiple factors that stem from digestive disorders while helping control health care costs.

Understand employee population: Claims data can reveal the impact that digestive disorders may be having on a workforce and why, including common comorbid health conditions and social drivers of health (SDOH) challenges. This insight can help inform health benefits design and identify opportunities to tailor communication strategies.

Promote preventive screenings and preventive care: Preventive screenings play a critical role in detecting digestive conditions early. Encourage annual checkups and adherence to preventive screenings like colonoscopies and at-home detection kits.

Provide behavioral health support: Offer employees **access to behavioral health resources** designed to help them manage the impact that digestive disorders can have on mental health. Apps like **Calm Health** can give employees 24/7 support when flare-ups disrupt quality of life.

Provide resources to help employees manage their condition: Through **UHC Hub®**, employers can offer Cylinder® to help employees manage digestive disorders—without adding administrative complexity. Cylinder provides virtual, personalized support for digestive health issues.

Learn how UnitedHealthcare supports a whole-person health approach >

United Healthcare®

[1] Digestive Disease Statistics in US 2025 | Key Facts. The Global Statistics. Available: https://www.theglobalstatistics.com/digestive-disease-statistics-in-us/. Accessed: March 19, 2026.

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United Healthcare

Condition Snapshot

Behavioral health

Behavioral health is one of the fastest growing spend drivers for employers.[1] Taking a thoughtful approach to well-being benefits may help meet employee needs while supporting employer goals.

Definition

- A state of mental, emotional and social well-being or behaviors and actions that affect wellness – including mental distress, substance use and suicidal tendencies

Trend

- 15% of working adults were estimated to have a mental health disorder[2]
- 48% of surveyed Americans reported plans to seek therapy within the next year, a 5% increase from the previous year[3]

Causes[4]

- Genetics
- Chronic conditions
- Substance use
- Trauma or abuse

12B

working days have been lost annually due to depression and anxiety[2]

"We're finally talking more openly about mental health and how it's as important as physical health to overall well-being. More people are feeling empowered to ask for help with less worry of consequences."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

Being mindful about mental health

As behavioral and mental health needs continue to increase, it's clear both employees and employers are feeling the strain.

Who

Most common among:[5]

Females

Millennials
(born between 1981–1996)

Most prevalent in:[6]

1. **Arkansas – 19.9%**
2. **Louisiana – 19.8%**
3. **West Virginia – 19.3%**
4. **Oregon – 19.0%**
5. **Oklahoma – 18.6%**

Find your state →

How

Lower productivity driven from rising burnout and absenteeism attributed to mental health issues[7]

Impacts on employee retention with 1 in 4 employees having considered leaving their employer due to mental health challenges[8]

High utilization rates with millions of office and ER visits each year tied to mental or behavioral health concerns[9]

continued

How much

$29.31

average per member, per month care costs[5]

↑10.9%

increase in year-over-year average cost per member, per month[5]

$1T

in global productivity losses linked to depression and anxiety[2]

Strategies for employers

For employers looking to better support the well-being of their employees, taking a whole-person approach to benefits is essential—which includes going beyond the physical and addressing mental health needs as well.

Focus on burnout prevention: Providing resources that offer **anytime-access to mental health support** tools can help. For instance, the **Calm Health app** includes sessions that address burnout and lack of focus at work.

Offer access to a continuum of care options: An **integrated ecosystem of behavioral health solutions** can help employees find care based on their specific level of needs across a range of programs and capabilities. More integration across medical, behavioral and **pharmacy** benefits may also lead to better coordination of care and medications across prescribers and different care settings.

Consider whole-family needs: Mental health challenges may affect both employees and their family members, which can make it more difficult to stay fully present at work. Ensuring benefits support different age groups can help ease that strain.

Make resources available 24/7: Mental health needs don't go on "pause" after a therapy session. Investing in **digital tools** that provide access to care anytime it's needed—such as self-guided exercises, on-demand educational resources, virtual care and telephonic support—can help employees stay engaged in their mental health journey.

Learn how UnitedHealthcare supports a whole-person health approach >

United Healthcare®

[1] Business Group on Health, Growing Mental Health Needs Drive Costs Globally, Requiring Employers to Push for Value. Business Group on Health, Oct. 16, 2024. Available: https://www.businessgrouphealth.org/resources/growing-mental-health-needs-drive-costs-globally.

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[3] Thriveworks 2025 Pulse on Mental Health Report. Thriveworks, May 12, 2025. Available: https://thriveworks.com/help-with/research/pulse-on-mental-health-report.

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[6] Frequent Mental Distress by State. America's Health Rankings. Available: https://www.americashealthrankings.org/explore/measures/mental_distress. Accessed: March 24, 2026.

[7] Employers See Sharp Increases in Mental Health Leave. Hall Benefits Law, LLC, Feb. 4, 2026. Available: https://hallbenefitslaw.com/employers-see-sharp-increases-in-mental-health-leave/.

[8] Workforce Well-being in 2026: Trends to Know. Calm, 2026. Available: https://health.calm.com/resources/blog/workforce-well-being-in-2026-5-trends-consultants-cant-afford-to-ignore/. Accessed: March 24, 2026.

[9] Mental health. CDC. Available: https://www.cdc.gov/nchs/fastats/mental-health.htm. Accessed: March 24, 2026.

When you sign up for Virtual Behavioral Coaching, you will be asked a series of questions to ensure that this program is the right fit for you. You may be directed to another resource if your answers indicate that a different type of program may better suit your needs.

Calm Health is not intended to diagnose or treat depression, anxiety, or any other disease or condition. If participants feel their condition is severe and needs attention, they are instructed to contact their treating provider or mental health therapist for help. Employee benefits including group health plan benefits may be taxable benefits unless they fit into specific exception categories. Please consult with your tax specialist to determine taxability of these offerings.

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Condition Snapshot

Diabetes

Just as insulin helps manage spikes in blood sugar levels, employers can help manage the spike in diabetes by embracing a whole-person health approach.

Definition

- The body's inability to use insulin to keep blood sugar at normal levels

Trend

- 115.2M estimated number of U.S. adults with prediabetes[1]
- 90–95% of those living with diabetes have type 2 diabetes[2]

Causes[2]

- Genetics/family history
- Hormonal imbalance
- Lack of physical activity
- Diet
- Obesity

40.1M+

U.S. adults are living with diabetes[1]

"The epidemic of type 2 diabetes and its warning sign, prediabetes, is sweeping across the country. With lifestyle modification and clinical support, this can be reversed."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

Sticking around

As the seventh-leading cause of death[3] and a significant health care cost driver, diabetes takes a toll on employees and employers alike.

Who

Most common in:[4]

Males

1946–1964

Baby Boomers
(born between 1946–1964)

Most prevalent in:[3]

1. **West Virginia – 18.4%**
2. **Kentucky – 16.2%**
3. **Louisiana – 15.4%**
4. **Arkansas – 15.3%**
5. **Mississippi – 15.2%**

Find your state →

How

Increases risks of:[5]

- Heart attack
- Stroke
- Blindness
- Kidney failure
- Loss of toes, feet or legs

continued

How much

≈$1,045

average per member, per month cost linked to members with diabetes[4]

↑5%

increase in year-over-year average cost per member, per month[4]

$413B

annual medical and economic cost of diabetes[6]

Strategies for employers

Employers that take a whole-person approach to their benefits may be able to better support employees living with diabetes while helping control rising health care costs.

Support healthier living: Programs that encourage and even incentivize employees for activities like annual wellness visits and biometric screenings may help them better monitor and manage their diabetes diagnosis.

Cover at-home screenings: At-home screenings can help monitor an employee's diabetes management, kidney function and more.

Offer continuous glucose monitors (CGMs): When CGMs and blood glucose test strips are covered under an employer's pharmacy plan at no additional cost for type 2 diabetes, it can encourage regular monitoring and real-time diabetes management.

Encourage preventive care: Annual checkups with a primary care provider (PCP) may help detect the condition sooner, lower risks and support a healthier lifestyle.

Create diabetes-friendly workplaces: Offer healthy meal options, flexible schedules for medical appointments and safe spaces for insulin administration.

Offer access to diabetes-focused programs: Programs like **Level2®** help UnitedHealthcare members living with type 2 diabetes get access to no-cost CGMs while working to lower their average blood glucose and improve their condition.

Learn how UnitedHealthcare supports a whole-person health approach >

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[1] National Diabetes Statistics Report. Centers for Disease Control & Prevention, Jan. 21, 2026. Available: https://www.cdc.gov/diabetes/php/data-research/index.html.

[2] Diabetes. Cleveland Clinic. Available: https://my.clevelandclinic.org/health/diseases/7104-diabetes.

[3] Diabetes in United States. America's Health Rankings, 2023. Available: https://www.americashealthrankings.org/explore/measures/Diabetes.

[4] UnitedHealthcare Employer & Individual self-funded and fully insured data based on claims incurred between Nov. 2024–Oct. 2025, paid through Jan. 2026.

[5] Diabetes Complications and Risks. American Heart Association. Available: https://www.heart.org/en/health-topics/diabetes/diabetes-complications-and-risks. Accessed: April 14, 2026.

[6] New American Diabetes Association Report Finds Annual Costs of Diabetes to be $412.9 Billion. American Diabetes. Association, Nov. 1, 2023. Available: https://diabetes.org/newsroom/press-releases/new-american-diabetes-association-report-finds-annual-costs-diabetes-be.

Disease Management programs and services may vary on a location-by-location basis and are subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. If you select a new provider or are assigned to a provider who does not participate in the Disease Management program, your participation in the program will be terminated. Self-Funded or Self-Insured Plans (ASO) covered persons may have an additional premium cost. Please check with your employer.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Your participation in Level2 Specialty Care is not a guaranty that you will improve your type 2 diabetes, and Level2 does not guaranty any individual any specific results. Please discuss with your doctor whether Level2 is right for you. You have received this information because you may be eligible to participate in Level2 through your current health plan based on the information we have. Participation in Level2 Specialty Care and getting a continuous glucose monitor (CGM) are subject to certain health plan and clinical eligibility criteria. Level2 is available to eligible members of select UnitedHealthcare plans at no additional charge outside of payment of their plan premium. Qualified members are prescribed a CGM when they join Level2 Specialty Care. See program details at mylevel2.com.

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Condition Snapshot

Obesity

Obesity is more than a number on a scale – it's a complex and costly epidemic. See how a whole-person approach may help employees achieve sustainable weight loss and reduce long-term health risks.

Definition

- Body mass index (BMI) of 30 or higher

Trend

- 32% increase in adult obesity rate from 1999–2023[2]
- 40.3% of adults and 21.1% of youths are considered obese[2]

Causes[3]

- Lack or limited amount of physical activity
- Eating more processed foods/sugar
- Genetics
- Lack of quality sleep

≈172M+

U.S. adults are living with obesity[1]

"Obesity is the apex predator of human health and well-being, and has become the #1 health risk in this nation."

Dr. Rhonda Randall
Chief Medical Officer, UnitedHealthcare Employer & Individual

Taking a heavy toll

From musculoskeletal conditions and mental health to productivity at work, obesity has major impacts on employees and employers.

Who

Most common among:[4]

Females

Gen X
(born between 1965–1980)

continued

Most prevalent in:[5]

1. **West Virginia – 41.4%**
2. **Mississippi – 40.4%**
3. **Louisiana – 39.2%**
4. **Alabama and Arkansas – 38.9%**
5. **Indiana – 38.4%**

Find your state →

How

Increases risks of:[6]

- Type 2 diabetes
- High blood pressure and high cholesterol (risk factors for heart disease)
- Stroke
- Chronic kidney disease
- Many types of cancer
- Depression and anxiety

How much

$770

average per member, per month cost linked to members with obesity[4]

↑30%

increase in year-over-year average cost per member, per month[4]

$4.3B

in productivity losses each year from obesity-related absenteeism[7]

Strategies for employers

Employers that take a whole-person approach to their benefits—for instance, by offering access to resources on healthier living and activities—may be able to better support employees living with obesity, as well as those hoping to avoid it.

Understand your population: Claims data can reveal the impact that obesity may be having on your workforce and why—including common comorbid health conditions and any social drivers of health challenges—to help inform health benefits design.

Include Centers of Excellence (COE) in your network: For good candidates for bariatric surgery, Bariatric Resource Services provide quality, cost-effective care from designated COEs.

Educate your workforce: Share resources and tips on topics like exercise, nutrition, quality sleep and more.

Offer weight-management programs: Comprehensive programs are designed to pair **GLP-1s** with clinical oversight and pharmacy support to help employees achieve better outcomes and give employers a higher ROI.

Walk the talk: Offer healthier, nonprocessed foods at meetings, events, on-site cafeterias and vending machines, and make it easier for employees to engage in physical activity by encouraging walking meetings or offering an on-site fitness center.

Incentivize healthier choices: With incentive-based wellness programs, employees can earn rewards for walking, cycling, tracking sleep and more.

Learn how UnitedHealthcare supports a whole-person health approach ›

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[1] Obesity and Severe Obesity Prevalence in Adults: United States, Aug. 2021–Aug. 2023. Centers for Disease Control and Prevention, Sept. 24, 2024. Available: https://www.cdc.gov/nchs/products/databriefs/db508.htm.

[2] The State of Obesity: Better policies for a healthier America. Trust for America's Health, Oct. 2025. Available: https://www.tfah.org/wp-content/uploads/2025/10/TFAH-2025-ObesityReport-Fnl.pdf.

[3] Risk Factors for Obesity. Center for Disease Control and Prevention, Nov. 14, 2025. Available: https://www.cdc.gov/obesity/risk-factors/risk-factors.html.

[4] UnitedHealthcare Employer & Individual self-funded and fully insured data based on claims incurred between Nov. 2024–Oct. 2025, paid through Jan. 2026.

[5] Obesity in United States. America's Health Rankings, 2025. Available: https://www.americashealthrankings.org/explore/measures/obesity.

[6] Consequences of Obesity. Center for Disease Control and Prevention, Dec. 5, 2026. Available: https://www.cdc.gov/obesity/php/about/consequences.html.

[7] Mapped: The most (and least) overweight US cities in 2025. Advisory Board, March 19, 2025. Available: https://www.advisory.com/daily-briefing/2025/03/19/overweight-cities.

See how UnitedHealthcare is working to help employers deliver better chronic condition support >

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