



# Condition snapshots

For the tens of millions of Americans living with chronic or metabolic conditions, the health care 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 >**



**Cardiovascular  
disease >**



**Diabetes >**



**Musculoskeletal  
disorders >**

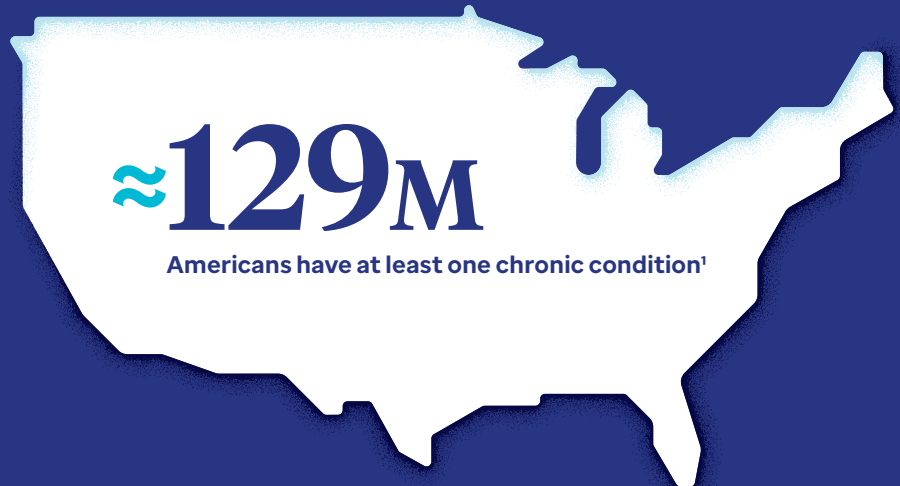


**Obesity >**

# 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.”**

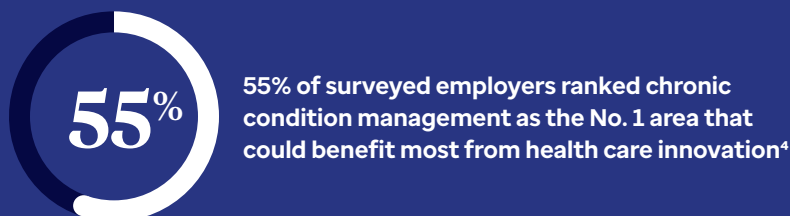
**Dr. Rhonda Randall**  
Chief Medical Officer  
UnitedHealthcare Employer & Individual



Employers are feeling the impact:



**2 in 5 employers surveyed said they expect to see higher prevalence and severity of chronic conditions in the future<sup>3</sup>**



While cancer, musculoskeletal conditions and circulatory issues are the costliest conditions for employers, according to UnitedHealthcare data,<sup>2</sup> metabolic conditions such as obesity and diabetes can increase the risk of other conditions, as well as exacerbate pre-existing conditions. In fact, the 28% of UnitedHealthcare members with metabolic conditions drove 56% of total health care spend.<sup>2</sup>

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 access to financial benefits and care management and clinical programs

**Continue to the snapshots >>**

<sup>1</sup> Chronic disease prevalence in the U.S.: Sociodemographic and geographic variations by zip code tabulation area. Centers for Disease Control and Prevention. Feb. 24, 2024. Available: [https://www.cdc.gov/pcd/issues/2024/23\\_0267.htm](https://www.cdc.gov/pcd/issues/2024/23_0267.htm).

<sup>2</sup> UnitedHealthcare Employer & Individual book of business data, Dec. 2023. Excludes Alaska, Hawaii, Puerto Rico and the U.S. Virgin Islands.

<sup>3</sup> Trends to Watch in 2024. Business Group on Health. Nov. 28, 2023. Available: <https://www.businessgrouphealth.org/resources/trends-to-watch-in-2024>.

<sup>4</sup> The future of health care: What matters to employers. Advisory Board, 2023. Available: <https://www.uhc.com/employer/news-strategies/2023-employer-innovation-survey-report>.

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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.

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## 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<sup>2</sup>
- ~2M new cases of cancer are diagnosed each year<sup>2</sup>
- 75% increase predicted in breast, lung and colon cancer diagnoses between 2022-2050<sup>3</sup>

### Causes<sup>4</sup>

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

# 1 in 3

people in the U.S. are affected by cancer<sup>1</sup>

**“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:<sup>5</sup>

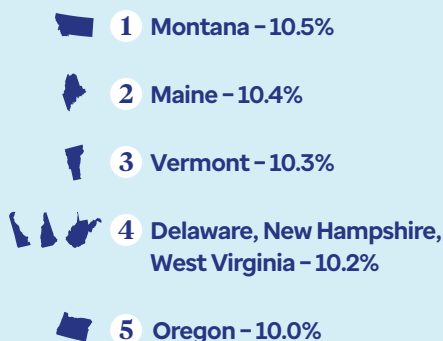


**Females**



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

Most prevalent in:<sup>6</sup>



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### 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

## How much

**\$58.35**

average cost per member,  
per month for employers<sup>5</sup>

**\$17.27**

average cost per member,  
per month for  
maintenance treatment<sup>5</sup>

Expected to comprise

**30%**

of employer health spend  
by 2027<sup>7</sup>

## 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, a faster prior authorization process and additional support 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.<sup>8</sup> 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 39 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 >**



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

<sup>2</sup> 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/>.

<sup>3</sup> Masterson, V. 12 new breakthroughs in the fight against cancer. World Economic Forum, Feb. 27, 2025. Available: <https://www.weforum.org/stories/2025/02/cancer-treatment-and-diagnosis-breakthroughs/>.

<sup>4</sup> Cancer Risk Factors. Center for Disease Control, Nov. 19, 2024. Available: <https://www.cdc.gov/cancer/risk-factors/index.html>.

<sup>5</sup> UnitedHealthcare book of business, 2024.

<sup>6</sup> Cancer by State. America's Health Rankings, 2023 data. Available: [https://www.americashealthrankings.org/explore/measures/Other\\_Cancer](https://www.americashealthrankings.org/explore/measures/Other_Cancer).

<sup>7</sup> U.S. Oncology Survey: Employers Expect Cancer Costs to Spike by Up To 30% in Three Years, Hungry for Value-Based Models. Carrum Health, Feb. 26, 2024. Available: <https://carrumhealth.com/oncology-survey/>.

<sup>8</sup> In five cancer types, prevention and screening have been major contributors to saving lives. National Cancer Institute, Dec. 5, 2024. Available: <https://www.cancer.gov/news-events/press-releases/2024/cancer-deaths-averted-prevention-screening-contribution>.

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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. This program is not available to UnitedHealthcare E&I Fully Insured customers/members in District of Columbia, Maryland, New Jersey, New York, Pennsylvania, Virginia, and West Virginia due to regulatory filings. 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

# Cardiovascular disease



As the No. 1 cause of death in the U.S.,<sup>1</sup> 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<sup>3</sup>



### Trend

- Nearly half of U.S. adults have some form of CVD<sup>1</sup>
- 5% year-over-year increase in prevalence among UnitedHealthcare members<sup>4</sup>



### Causes<sup>5</sup>

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

# #1

cause of death in the U.S. since 1921<sup>2</sup>

**“While we’ve seen major advances in our ability to treat cardiovascular disease, we still have a long way to go.”**

**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:<sup>4</sup>



**Males**



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

Most prevalent in:<sup>3</sup>



**1 West Virginia – 14.2%**



**2 Alabama – 12.4%**



**3 Arkansas – 12.1%**



**4 Tennessee – 12.0%**



**5 Louisiana – 11.7%**

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### How



**Increased risk of conditions** like stroke, heart failure,<sup>6</sup> cardiac dysrhythmias (most common diagnosis),<sup>4</sup> coronary artery disease complications<sup>4</sup> and kidney disease<sup>7</sup>



**Mental health issues** such as depression and anxiety<sup>8</sup>



**Financial strain** due to medical costs and absenteeism

## How much

**\$37.29**

average cost per member,  
per month for employers<sup>4</sup>

**\$5.69**

average out-of-pocket cost  
to members per month<sup>4</sup>

**\$361B**

projected annual productivity  
losses due to cardiovascular  
conditions by 2050<sup>9</sup>

## 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 cardiac rehabilitation programs:** Virtual services like Movn Health offer convenient recovery support after events such as a heart attack or coronary artery bypass surgery.



**Address top cardiac conditions:** Informed by claims data, benefits design may include 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 like **UnitedHealthcare Rewards** 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 >**



<sup>1</sup> Heart disease remains leading cause of death as key health risk factors continue to rise. American Heart Association, Jan. 27, 2025. Available: <https://newsroom.heart.org/news/heart-disease-remains-leading-cause-of-death-as-key-health-risk-factors-continue-to-rise>.

<sup>2</sup> More than half of U.S. adults don't know heart disease is leading cause of death, despite 100-year reign. American Heart Association, Jan. 24, 2024. Available: <https://newsroom.heart.org/news/more-than-half-of-u-s-adults-dont-know-heart-disease-is-leading-cause-of-death-despite-100-year-reign>.

<sup>3</sup> Cardiovascular Diseases in the United States. America's Health Rankings, 2024. Available: <https://www.americashealthrankings.org/explore/measures/CVD>.

<sup>4</sup> UnitedHealthcare Employer & Individual internal data based on claims incurred between Jan. 1, 2024 - Dec. 31, 2024.

<sup>5</sup> Heart Disease Risk Factors. Centers for Disease Control & Prevention, Dec. 2, 2024. Available: <https://www.cdc.gov/heart-disease/risk-factors/index.html>.

<sup>6</sup> Interaction of heart failure and stroke: A clinical consensus statement of the ESC Council on Stroke, the Heart Failure Association (HFA) and the ESC Working Group on Thrombosis. European Journal of Heart Failure published by John Wiley & Sons Ltd on behalf of European Society of Cardiology, Dec. 20, 2023. Available: <https://pubmed.ncbi.nlm.nih.gov/37905380/>.

<sup>7</sup> Chronic Kidney Disease, Diabetes, and Heart Disease. Centers for Disease Control & Prevention, May 15, 2024. Available: <https://www.cdc.gov/kidney-disease/risk-factors/link-between-diabetes-and-heart-disease.html/>.

<sup>8</sup> Depression and Heart Disease. Johns Hopkins Medicine. Available: <https://www.hopkinsmedicine.org/health/conditions-and-diseases/depression-and-heart-disease>. Accessed: June 20, 2025.

<sup>9</sup> Forecasting the Economic Burden of Cardiovascular Disease and Stroke in the United States Through 2050: A Presidential Advisory From the American Heart Association. National Institutes of Health, July 23, 2024. Available: <https://pubmed.ncbi.nlm.nih.gov/38832515/>.

UnitedHealthcare Rewards is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right

for you. Receiving an activity tracker, certain credits and/or rewards and/or purchasing an activity tracker with earnings may have tax implications. You should consult with an appropriate tax professional to determine if you have any tax obligations under this program, as applicable. If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. You may call us toll-free at 1-866-230-2505 or at the number on your health plan ID card, and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Rewards may be limited due to incentive limits under applicable law. Components subject to change. This program is not available for fully insured members in Hawaii, Vermont and Puerto Rico nor available to level funded members in District of Columbia, Hawaii, Vermont and Puerto Rico.

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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

- 3% year-over-year increase in prevalence among UnitedHealthcare members<sup>1</sup>
- 90-95% of those living with diabetes have type 2 diabetes<sup>2</sup>

### Causes<sup>3</sup>

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

# 38.1M+

**U.S. adults are living with diabetes<sup>2</sup>**

**“The United States of America is on track to become the United States of Diabetes. The epidemic of type 2 diabetes and its warning sign, prediabetes, is sweeping across the country.”**

**Dr. Rhonda Randall**

Chief Medical Officer, UnitedHealthcare Employer & Individual

## Sticking around






As the seventh-leading cause of death<sup>4</sup> and a significant health care cost driver, diabetes takes a toll on employees and employers alike.

### Who

Most common in:<sup>1</sup>



Most prevalent in:<sup>5</sup>

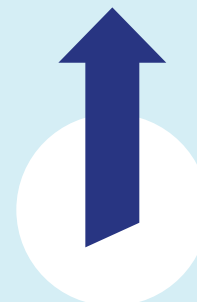
-  **1 West Virginia – 18.2%**
-  **2 Mississippi – 17%**
-  **3 Louisiana – 16.1%**
-  **4 Alabama – 15.7%**
-  **5 South Carolina – 14.9%**

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### How

Increases risks of:<sup>4</sup>

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



## How much

**\$1,093**

average cost per member,  
per month for employers<sup>1</sup>

**\$137**

average out-of-pocket cost  
to members per month<sup>1</sup>

**\$413B**

annual medical and economic  
cost of diabetes<sup>6</sup>

## 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:** With wellness programs like **UnitedHealthcare Rewards**, employees are incentivized to make healthier choices as they earn rewards for activities like annual wellness visits and biometric screenings that help monitor diabetes.



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



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



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



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



**Offer access to diabetes-specific programs:** Programs like Level2<sup>®</sup> 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 >**



<sup>1</sup> UnitedHealthcare book of business, 2024.

<sup>2</sup> National Diabetes Statistics Report. Centers for Disease Control and Prevention, 2024. Available: <https://www.cdc.gov/diabetes/php/data-research/index.html>.

<sup>3</sup> Diabetes. Cleveland Clinic. Available: <https://my.clevelandclinic.org/health/diseases/7104-diabetes>.

<sup>4</sup> Diabetes. Centers for Disease Control & Prevention, Jan. 15, 2025. Available: <https://www.cdc.gov/nchs/fastats/diabetes.htm>.

<sup>5</sup> Diabetes in United States. America's Health Rankings, 2023. Available: <https://www.america'shealthrankings.org/explore/measures/Diabetes>.

<sup>6</sup> 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>.

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## Condition Snapshot

# Musculoskeletal disorders

Musculoskeletal (MSK) disorders are a leading cause of disability worldwide,<sup>1</sup> 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

- 6% increase in MSK conditions among UnitedHealthcare members from 2023–2024<sup>3</sup>
- 8% rise in MSK care costs per member each year<sup>4</sup>



### Causes<sup>5</sup>

- Injuries
- Other chronic conditions, such as arthritis, obesity<sup>6</sup> and cardiovascular disease<sup>7</sup>
- Overuse, frequent exertion and repetitive motion
- Poor posture

# 40%

of U.S. adults experience MSK conditions<sup>2</sup>

**“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:<sup>3</sup>



**Females**



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

Most common diagnoses among UnitedHealthcare members:<sup>3</sup>

**1 Back pain**

**2 Osteoarthritis**

**3 Other tissue conditions**

### How



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



**Mental health issues** such as anxiety, depression and social isolation<sup>8</sup>



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

## How much

**\$40.51**

average cost per member,  
per month for employers<sup>3</sup>

**\$10.25**

average out-of-pocket cost  
to members per month<sup>3</sup>

**\$381B**

estimated annual medical  
expenses of U.S. adults  
with MSK conditions<sup>2</sup>

## 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 care:** Physical and occupational therapy, chiropractic care and digital solutions (available through **UHC Hub™**) can offer targeted support.



**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.



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



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



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

**Learn how UnitedHealthcare supports  
a whole-person health approach >**



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

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

<sup>3</sup> UnitedHealthcare book of business, 2024.

<sup>4</sup> Hinge Health book-of-business claims data analysis based on a sample of over 46 million commercially insured population in the United States in 2017–2022 (2023).

<sup>5</sup> Musculoskeletal Pain. Cleveland Clinic, Aug. 15, 2024. Available: <https://my.clevelandclinic.org/health/symptoms/musculoskeletal-pain>.

<sup>6</sup> Cardiovascular health linked to musculoskeletal disorders. The University of Utah, June 6, 2023. Available: <https://attheu.utah.edu/science-technology/link-between-cardiovascular-health-disorders-such-as-carpal-tunnel/>. Accessed: June 10, 2025.

<sup>7</sup> Obesity as a risk factor for musculoskeletal injury during manual handling tasks: A systematic review and meta-analysis. Science Direct, Aug. 2024. Available: <https://www.sciencedirect.com/science/article/pii/S0925753524001383>.

<sup>8</sup> Mental health among patients with chronic musculoskeletal pain and its relation to number of pain sites and pain intensity. BMC Musculoskeletal Disorders, 2022. Available: <http://bmcmusculoskeletdisord.biomedcentral.com/articles/10.1186/s12891-022-06051-9>.

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.

UnitedHealthcare Rewards is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you. Receiving an activity tracker, certain credits and/or rewards and/or purchasing an activity tracker with earnings may have tax implications. You should consult with an appropriate tax professional to determine if you have any tax obligations under this program, as applicable. If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. You may call us toll-free at 1-866-230-2505 or at the number on your health plan ID card, and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Rewards may be limited due to incentive limits under applicable law. Components subject to change. This program is not available for fully insured members in Hawaii, Vermont and Puerto Rico nor available to level funded members in District of Columbia, Hawaii, Vermont and Puerto Rico.

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.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.

## 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

- Prevalence among U.S. adults doubled between 1990–2021<sup>1</sup>

### Causes<sup>2</sup>

- Lack or limited amount of physical activity
- Eating more processed foods/sugar
- Genetics
- Social drivers of health (SDOH)

# ≈ 100M+

**U.S. adults are living with obesity<sup>1</sup>**

**“Obesity is the apex predator of human health and well-being, and 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:<sup>3</sup>








**Males**



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

Most prevalent in:<sup>4</sup>

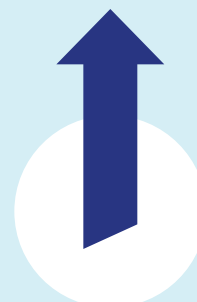
-  **1 West Virginia – 41.2%**
-  **2 Mississippi – 40.1%**
-  **3 Arkansas – 40.0%**
-  **4 Louisiana – 39.9%**
-  **5 Alabama – 39.2%**

[Find your state →](#)

### How

Increases risks of:<sup>5</sup>

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





## How much

**\$714**

average cost per member,  
per month for employers<sup>1</sup>

**\$117**

average out-of-pocket cost  
to members per month<sup>2</sup>

**\$4.3B**

in productivity losses  
each year from obesity-related  
absenteeism<sup>3</sup>

## 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 SDOH challenges – to help inform health benefits design.



**Offer weight-management programs:** Some programs, such as Total Weight Support from UnitedHealthcare, are designed to work alongside drugs like **GLP-1s** to help employees achieve better outcomes and give employers a higher ROI.



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



**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.



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



**Incentivize healthier choices:** With programs like **UnitedHealthcare Rewards**, employees can earn rewards for walking, cycling, tracking sleep and more.

**Learn how UnitedHealthcare supports  
a whole-person health approach >**



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

<sup>2</sup> Three-Quarters of U.S. Adults Are Now Overweight or Obese. New York Times, Nov. 14, 2024. Available: <https://www.nytimes.com/2024/11/14/well/obesity-epidemic-america.html>.

<sup>3</sup> UnitedHealthcare book of business, 2024.

<sup>4</sup> Obesity in United States. America's Health Rankings, 2025. Available: <https://www.americashealthrankings.org/explore/measures/obesity>.

<sup>5</sup> Consequences of obesity. Centers for Disease Control and Prevention, July 15, 2022. Available: <https://www.cdc.gov/obesity/basics/consequences.html>. Accessed: May 4, 2025.

<sup>6</sup> 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>.

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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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**See how UnitedHealthcare is working to help employers  
get more value from their health benefits >**

**United  
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