

My name is Darolyn Skelton and I am the Director of Marketing for Western Bariatric Institute. I was representing Western Bariatric Institute and all the patients in need of weight-loss surgery. On Sept. 18, 2012 a projection hit the media predicting that 49 states including Nevada would have 50% of their population as Obese. Obesity is a complex, multifactorial chronic disease, which requires a multidisciplinary treatment approach. This approach must encompass the best standards of care, both in terms of the treatments chosen and the clinical environment in which they are delivered. Such treatments should be reimbursed as any other disease therapy would be, without limitations or restrictive benefit designs. Modest weight loss with non-surgical therapy can be achieved with intense behavior modification +/- pharmacotherapy. More substantial weight loss with greater benefits is achieved by bariatric surgery with a low complication rate. Cost savings are generated over time. I have attached documentation to support the following:

- * Helps Type 2 diabetic patients achieve glycemic control more effectively than intensive medical therapy within 1 year. [i] ,[ii]
- * Resolves or improves Type 2 diabetes and other obesity-related CV comorbidities for up to 5 years . [iii],[iv],[v],[vi]
- * Reduces medication use for Type 2 diabetes and other CV comorbidities for up to 3 years.[vii] ,[viii],[ix]
- * Results in morbidity & mortality rates that are similar to well-established general surgery procedures such as gallbladder surgery and hysterectomy.[x]
- * Reduces the risk of cardiovascular death (myocardial infarction or stroke) compared to customary intervention.[xi]
- * Appears to be more efficient than usual care in the prevention of Type 2 diabetes. Further, Type 2 diabetes was less likely to develop in patients that underwent bariatric surgery (compared to the control group

We would recommend plan D, Public Employees' Benefit Program.

Thank you,
Darolyn Skelton

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