

# Zone.Health: A Value-based, Technology Enabled Model for the Use of GLP1-RAs for Weight Loss 3 Months Outcomes

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## INTRODUCTION

Typically, glucagon-like peptide-1 receptor agonists (GLP-1 RAs) have been prescribed by physicians episodically without being part of an integrated continuous methodology that monitors lifestyle modification. Existing data shows that patients using GLP-1 RAs via traditional provider care can regain weight after discontinuation of these agents leading to a negative Return on Investment (ROI) to payors.

**The aim of this study is to describe the implementation of a technology-enabled, hyper personalized and value-based program for obesity management.**

Midway results of the Zone.Health program's suggest positive outcomes were achieved due to main factors:

1. Enabling remote continuous data monitoring using digital technology with access to an integrated care team that engenders behavioral change around lifestyle modification.
2. Linking patient engagement with contractual incentives including the use of outcomes to drive payment policy.

## METHODOLOGY

In January 2023, the first 20 adult participants aged 18 to 70 years with BMI (body mass index) above 27 kg/m<sup>2</sup> were included in this observational analysis. Eligibility criteria for GLP-1 RAs were determined using a comprehensive metabolic testing panel completed before program initiation. Participants were entirely on-boarded remotely using a mobile application and home visits.

**Participants signed up to a value-based contract, meaning that compliant patients would be provided with a partial refund (guarantee) if they did not lose at least 10% body weight by month 6.**

For the contractual guarantee on payment to be active, patients must meet the minimum compliance criteria set including engagement, food logs, data collection (glucose, steps) and adherence to medication. A retrospective and observational 3 months analysis of our model of care was conducted. Statistical analysis was performed by Microsoft Excel and presented as a mean. A paired t-test was used to compare pre and post-intervention outcomes ( $p < 0.05$ ).

## RESULTS

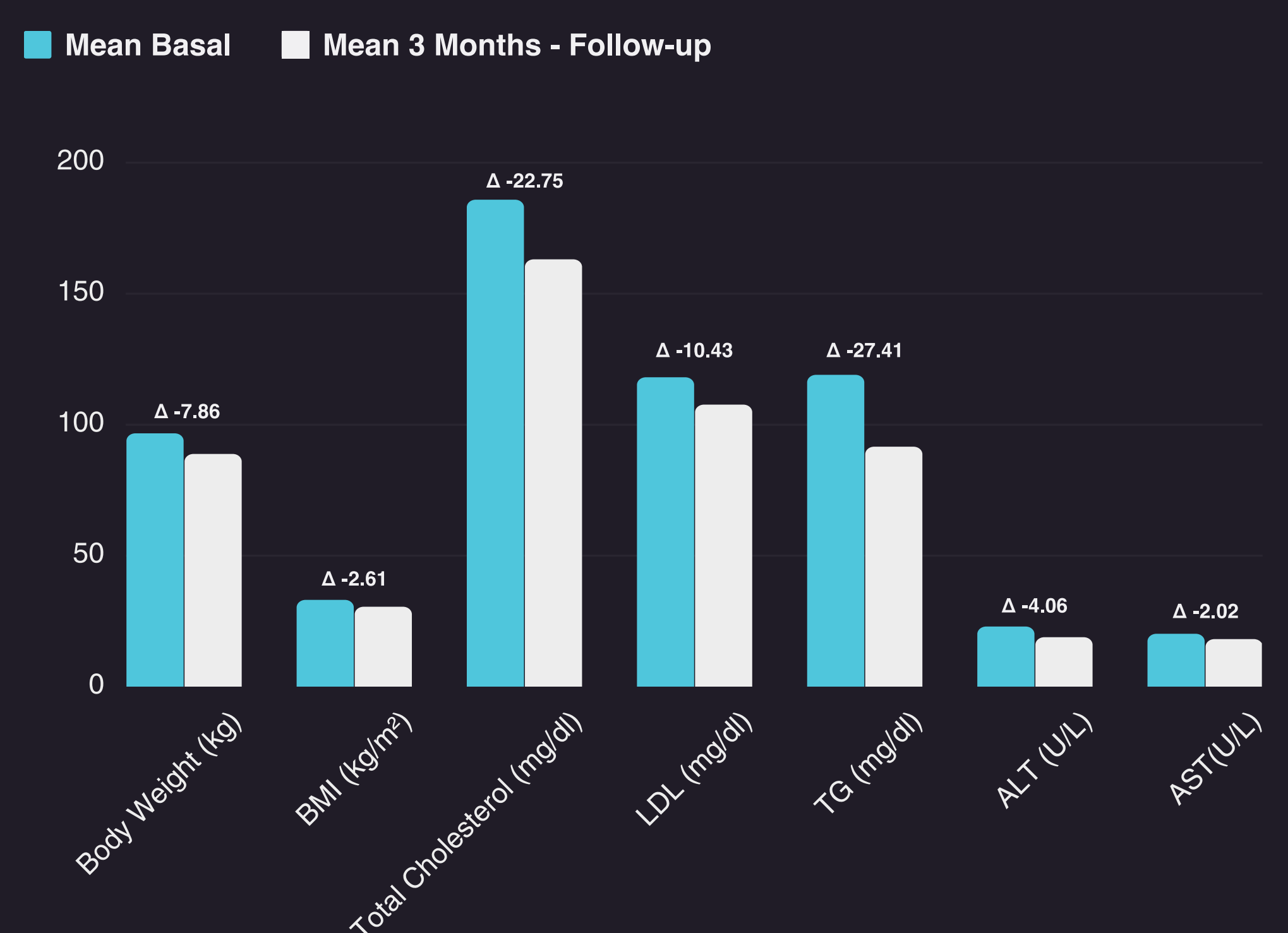
Descriptive characteristics of participants are shown (Table 1). Mean age was 44.6 years and 65% of participants were male. The mean baseline BMI was 33.06 kg/ m<sup>2</sup>. Analysis of mean changes in clinical outcomes among the participants from baseline to 3 months follow up (Figure 1) shows the reduction in weight (8.13%,  $p=0.0001$ ), BMI (7.88%,  $p=0.00001$ ), HbA1c (0.48 %,  $p=0.0001$ ), total cholesterol (12.25%,  $p=0.0008$ ), LDL (8.84%, $p =0.05$ ), TG (23.04 %,  $p=0.16$ ), ALT (17.72%,  $p=0.05$ ), AST (10.07%,  $p= 0.008$ ).

The mean reduction in total fat mass and muscle loss were 15.2 % and 2.37 % respectively. From the remote data, the average meals recorded per participant per month was 87. The number of steps per day (SPD) obtained from the wearable band recorded an average of 7.3 across all participants. **All patients adhered to the minimum compliance criteria.**

Table 1.  
Demographics and Clinical Characteristics of the participants at Baseline (n =20)

CHARACTERISTICS	MEAN
Body weight (kg)	96.63 ± 14.4
BMI (kg/m <sup>2</sup> )	33.06 ± 5.20
Age (years)	44.6 ± 8.99
HbA1c (%)	5.56 ± 0.44

Figure 1:  
Metabolic Parameters after 3 months - follow up (n = 20)



## CONCLUSION

These initial findings suggest that management of obesity with GLP-1 RAs using a companion platform that provides a **hyper-personalized and continuous care model centered around behavioral change, alongside contractual financial incentives associated to program compliance**, such as Zone. Health, has the significant potential to improve obesity outcomes and the ROI on medications.