



NOOM HEALTH

Beyond the workplace.

An employer's guide to addressing social drivers of health.

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Let’s talk about benefits that truly work for everyone.

We share a common goal: creating a workplace where all employees can thrive. With such diverse populations, it’s nearly impossible to remove all obstacles to health for all individuals, but in the workplace, this translates to creating an environment where all employees have access to the resources and support they need to achieve their best health.

We know that offering competitive benefits is crucial for attracting and retaining top talent. But what if those benefits weren’t just “nice-to-haves,” and truly empowered employees to live healthier, happier lives?

That’s why we created this playbook about the impact of social drivers of health (SDOH). Factors like housing, food security, and access to quality healthcare significantly influence an individual’s well-being, and, ultimately, their ability to contribute their best at work.

Health equity is about ensuring that everyone has a fair and just opportunity to be as healthy as possible. Companies have the power to significantly influence the health and well-being of their employees. This influence encompasses not only physical health, but also mental and emotional well-being. Understanding and addressing the complex relationship between job conditions, unemployment, and health is paramount in fostering a healthier, more equitable society.

In this playbook, we’ll explore how:

- Investing in SDOH-focused benefits can create a truly inclusive workplace. By addressing the unique needs and challenges faced by all employees, regardless of their background or circumstances, we can foster a culture of equity and well-being.
- SDOH benefits can lead to tangible results, such as increased employee engagement, reduced absenteeism, and improved productivity.



→ At Noom, we go beyond traditional wellness and integrate elements of health equity into our program to ensure all members reach their goals by:

- Promoting health literacy with bite-sized education
- Addressing environmental influences on weight
- Navigating cultural traditions
- Building social support systems, and
- Tackling food affordability and accessibility

It’s not just about providing resources, but also about fostering a culture where health and well-being are integral to the company’s values. At Noom, we’re committed to supporting organizations in their quest to promote health equity. By prioritizing SDOH and implementing benefits solutions that work for everyone, we can create a truly exceptional employee experience, where individuals feel supported, valued, and empowered to reach their full potential.

Join us on this journey towards better health. Together, we can create a healthier, more equitable future for all.

In good health,

Cody Fair

Cody Fair, Chief Commercial Officer
Noom Health

What shapes employee population health?

A primer for understanding the real-world factors that shape your workforce's well-being.

Our employees' health is shaped by more than just their choices at work. Their home life, education, neighborhood, and community support systems also play a significant role. These factors, known as social drivers of health (SDOH), explain why two people with similar jobs might have very different health outcomes. These social and environmental factors influence about 80 to 90% of a person's health—far more than medical care alone.¹ For employers, addressing these SDOH is crucial for both business success and employee well-being. Organizations that design benefits programs with these factors in mind can more effectively support their workforce while potentially reducing healthcare costs and improving productivity.

EDUCATION ACCESS AND QUALITY.

Making informed choices is challenging when health information is hard to understand. Complex medical terms and complicated instructions can lead to confusion and missteps. Research shows that patients with low health literacy were twice as likely to be hospitalized compared to those with a firmer grasp of health information.² This challenge is often more pronounced in communities with fewer educational opportunities and where limited access to nutritious food and lower consumption of fruits and vegetables contribute to higher rates of chronic conditions like diabetes and heart disease.³

At Noom, we make health information clear and accessible for everyone through our app's interactive content modules, written at a sixth-grade reading level. Instead of medical jargon, we use straightforward language that empowers members to make informed health choices. We also support different learning styles by offering ample visual aids and audio formats, which help translate complex topics into bite-sized, actionable content. This approach ensures that people from all backgrounds, regardless of their health literacy, can easily integrate our information into their daily lives.

At Noom, we help bridge these environmental gaps through digital solutions. Our virtual health services and resources provide access to clinical care, nutrition guidance, and exercise opportunities wherever employees live.

SDOH by the numbers.

2x

The likelihood of hospitalization for patients with low health literacy compared to those with adequate health literacy.⁸

80-90%

The percentage of health outcomes that are influenced by social and environmental factors.⁹

23.5 million

The number of Americans who live in “food deserts.”¹⁰

47 million

The number of Americans facing food insecurity.¹¹

42%

The increased likelihood of adults meeting physical activity guidelines when they have access to free or affordable recreation facilities.¹²

FOOD SECURITY.

Good nutrition is key to health, but many Americans struggle to access healthy food. In 2023, approximately 47 million individuals in the United States faced food insecurity, struggling to access adequate and nutritious meals. This challenge was not evenly distributed across communities: approximately 23.3% of Black households and 21.9% of Hispanic households experienced food insecurity, compared to 9.9% of White households.⁴ These widespread nutrition challenges extend into the workplace, affecting both employee performance and their ability to benefit from corporate wellness programs.

Location matters, too. Nearly 23.5 million Americans live in “food deserts,” defined by low income and limited supermarket access. For people with heart disease, living in these areas raises the risk of heart attacks by 44%, mainly due to low income.⁵ Rising food costs in recent years have made accessing nutritious food even more challenging, forcing many employees to choose between healthy meals and other basic needs.

BUILT ENVIRONMENT.

The spaces where we live and work—what we call the built environment—shape our daily choices about exercise, food, and healthcare. Our physical surroundings influence everything from how much we move to how easily we can access medical care and healthy food options. Research shows that adults who can access free or low-cost recreation facilities are 42% more likely to meet recommended physical activity levels for better health.⁶

These environmental factors affect different communities in distinct ways. City residents often face challenges like overcrowded spaces and limited green areas for outdoor activities. The density of urban environments can make it challenging to find safe, open spaces for exercise or recreation. Meanwhile, rural communities typically deal with different barriers. Residents might have plenty of open space but face long travel distances to reach gyms, healthcare facilities, or recreation centers.

At Noom, we help bridge these environmental gaps through digital solutions. Our virtual health services and resources provide access to clinical care, nutrition guidance, and exercise opportunities wherever employees live. We also help mitigate medication access barriers by delivering prescribed weight management medications—including GLP-1s—directly to employees’ homes.

SOCIAL AND CULTURAL CONTEXT.

Culture shapes how people think about food and health. Networks of trust, shared values, and social connections—often referred to as social capital—play a significant role in improving health outcomes. Programs are more effective when they respect cultural differences and leverage these community ties. For example, when a 2022 weight-loss program was tailored to address

Black women’s cultural preferences, dietary habits, social support networks, and unique health barriers, participants lost an average of 7.5 pounds over one year—significantly more than those in standard programs.⁷

At Noom, we know that healthy living looks different for everyone. We support people from all walks of life by helping them adapt their favorite traditional recipes to be healthier and connecting them to peers from similar backgrounds who share common goals.

This approach keeps people engaged and helps them build lasting healthy habits. By understanding these factors, employers can more effectively support their population’s health. Truly impactful wellness programs must consider the whole picture of employees’ lives—not just what happens at the workplace.

Understanding SDOH: A glossary for action.



FOOD DESERT:
Areas with limited access to affordable and nutritious food, often lacking nearby grocery stores.



HEALTH LITERACY:
The ability to understand and use health information to make informed decisions about one’s well-being.



BUILT ENVIRONMENT:
The physical surroundings where people live, work, and play, including housing, infrastructure, and green spaces.



SOCIAL CAPITAL:
The networks, relationships, and trust within a community that influence access to resources and support.

The rising cost of health inequity.

Environmental and social drivers impact costs and reduce productivity for businesses. Innovative organizations are taking proactive steps to mitigate these impacts.



Health disparities driven by social factors—from housing access to food security—have profound economic consequences, with employers bearing much of the burden in the United States. The economic toll of these disparities is staggering, costing \$42 billion annually in lost productivity and an additional \$320 billion in excess healthcare spending.¹³ For employers, ignoring these issues leads to lower engagement, higher turnover, and escalating costs.

“When we overlook factors like housing and food access, we’re missing up to 90% of what drives health outcomes—and business performance,” says Noom Clinical Solutions Consultant Jennifer Jones. “Addressing health disparities isn’t just a matter of social justice; it’s an economic imperative.”¹⁴

The scale of these disparities underscores the urgency for action: According to a 2024 study, there is a 20.4-year gap between populations with the highest and lowest life expectancies in the U.S., with Asian Americans living an average of 84.0 years compared to just 63.6 years for American Indian and Alaska Native populations in the West.¹⁵ The economic opportunity is clear: a separate report found that eliminating racial economic gaps (including healthcare disparities), could add \$2.7 trillion to the economy annually and save over \$150 billion in medical expenses by 2050.¹⁶

BEYOND TRADITIONAL WELLNESS PROGRAMS.

Traditional wellness programs, such as gym memberships and biometric screenings, often fail to account for systemic inequities within the workforce. Even among employees with employer-sponsored insurance, significant disparities persist. For instance, many underserved populations face higher rates of discrimination, leading to poorer mental and physical health outcomes, reduced morale, and higher turnover.¹⁷

“When we overlook factors like housing and food access, we’re missing up to 90% of what drives health outcomes—and business performance.

JENNIFER JONES
CLINICAL SOLUTIONS CONSULTANT
NOOM

The equity edge.

THE COST OF HEALTH INEQUITY



WHEN COMPANIES TAKE ACTION

Metro Nashville Public Schools achieved the following:



Low-income employees are particularly disadvantaged. Research indicates that they are significantly less likely to benefit from workplace wellness programs than their higher-income peers.²³ Barriers such as transportation issues, food insecurity, and lack of access to childcare often prevent these workers from fully utilizing wellness resources.

The economic consequences are stark, but companies that address these barriers see significant returns. Metro Nashville Public Schools demonstrates the potential impact: after redesigning their benefits package to focus on health equity, they achieved a 30% cut in medical costs, a 38% drop in inpatient admissions, and a 23% decline in ER visits—while also improving retention and reducing absenteeism—demonstrating that equity-driven investments benefit both employees and organizational outcomes.²⁴

A CASE STUDY: GEISINGER’S FRESH FOOD FARMACY.

While the example of Metro Nashville Public Schools demonstrates the impact of comprehensive benefits redesign, other organizations are taking targeted approaches to specific social drivers. Geisinger Health System demonstrates the transformative potential of addressing food insecurity through its Fresh Food Farmacy program, which offers diabetic patients access to free, nutritious groceries and lifestyle coaching. The results are compelling: participants experienced significant reductions in A1C levels, fewer emergency care visits, and improved health outcomes.²⁵

Geisinger’s model offers a blueprint for employers. Organizations can reduce healthcare costs by tackling systemic barriers such as food insecurity while empowering employees to lead healthier, more productive lives.



STRATEGIES FOR EMPLOYERS: TURNING INSIGHT INTO ACTION.

Employers can play a pivotal role in addressing SDOH by embedding equity into their policies, benefits, and operations. Here are three actionable strategies:



1. Rethink employee benefits.

Equity-focused benefits ensure all employees have access to the resources they need. Examples include tiered healthcare subsidies based on income, meal support programs, and transportation allowances for rural or underserved employees.



2. Engage communities.

Collaborate with local organizations to address systemic challenges. For instance, partnerships with food banks, housing agencies, or telehealth providers can help bridge critical gaps for employees.



3. Leverage data to drive decisions.

Using workforce data allows employers to pinpoint disparities and design targeted interventions. Analytics can reveal patterns, such as higher absenteeism rates in specific demographics, enabling tailored and impactful solutions.

BUILDING A COMPETITIVE EDGE THROUGH EQUITY.

Investing in SDOH delivers measurable returns beyond health outcomes. Companies prioritizing health equity enhance their reputations, attract top talent, and foster workforce loyalty while reducing absenteeism and improving productivity. The COVID-19 pandemic highlighted how pre-existing inequities amplify business risks — and how forward-thinking organizations that address these disparities are better positioned to weather disruptions while maintaining operational strength.

CALL TO LEAD.

The evidence is clear: employers have the imperative and the tools to drive meaningful change. Whether through redesigned benefits, community partnerships, or data-driven solutions, companies that move beyond surface-level wellness initiatives to address root causes can unlock immense economic potential while building a more sustainable and productive workforce.

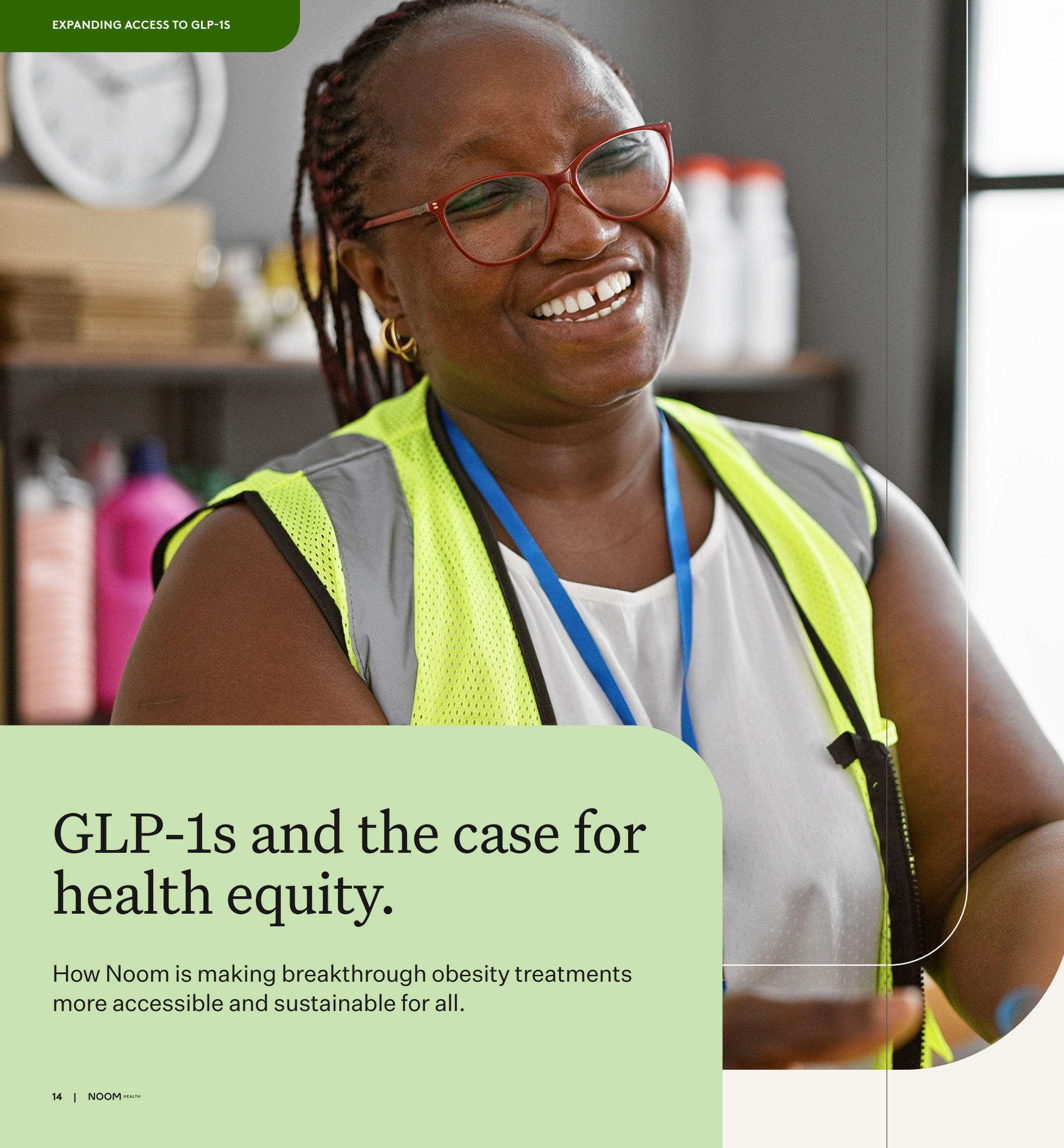
Expanding employee support.



HIGH-IMPACT SDOH PROGRAMS

- Virtual behavioral support
- Telehealth obesity care
- Medication delivery/adherence support
- Transportation assistance
- Healthy food access programs
- Income-based premium subsidies

These enhancements complement traditional wellness initiatives while delivering measurable business outcomes.



GLP-1s and the case for health equity.

How Noom is making breakthrough obesity treatments more accessible and sustainable for all.

Glucagon-like peptide-1 (GLP-1) agonists like Wegovy and Zepbound have revolutionized obesity treatment, offering new hope to millions of Americans grappling with this complex health challenge. However, like many health innovations, the impact of these medications depends heavily on people's neighborhoods, workplaces, and daily circumstances. Recent research from Yale University's School of Medicine suggests that expanding access to GLP-1s could save over 42,000 lives annually in the United States—underscoring their potential to shape public health outcomes.²⁶ Yet their rapid adoption also highlights this country's healthcare divide, as their high costs and uneven availability risk turning effective obesity treatment into another marker of healthcare privilege rather than a tool for addressing longstanding health disparities.

"Health equity is essential for obesity care," says Jennifer Jones, Clinical Solutions Consultant at Noom. "While GLP-1 medications represent a breakthrough in treatment, their steep price tag and barriers to access risk deepening the very health disparities we're trying to address. These medications can only improve public health if everyone who needs them has access and can fully benefit."

A HEALTHCARE SYSTEM UNDER STRAIN.

The numbers paint a clear yet troubling picture of our current healthcare system's struggles to meet the growing demand for obesity care. Approximately 89 million U.S. adults currently live with obesity, yet only 7,740 doctors are board-certified in obesity medicine, resulting in a staggering patient-to-physician ratio of 11,499:1.²⁷ With obesity specialists making up less than 1% of all licensed doctors in the country, primary care physicians shoulder most of the burden. However, they often lack the training, resources, and time to manage the condition effectively.

"While GLP-1 medications represent a breakthrough in treatment, their steep price tag and barriers to access risk deepening the very health disparities we're trying to address."

JENNIFER JONES
CLINICAL SOLUTIONS CONSULTANT
NOOM

The GLP-1 access gap: By the numbers.

89 million

The estimated number of U.S. adults who currently live with obesity.⁴⁰

\$12,000

The average annual cost of name-brand GLP-1 medications.⁴¹

\$3,590

Additional annual medical costs per employee with severe obesity.⁴³

11,499:1

The patient-to-obesity-specialist ratio, highlighting care shortages in underserved communities.⁴⁵

42%

The percentage of large employers covering GLP-1s.⁴²

42,000

The estimated number of lives that could be saved annually in the U.S. by expanding GLP-1 access.⁴⁴

16 million

The estimated number of Americans who live in pharmacy deserts.⁴⁶



This provider scarcity becomes even more concerning when layered with pharmacy access challenges. Nearly 16 million Americans live in pharmacy deserts, areas with limited or no access to pharmacy services.²⁸ People in these communities, especially rural areas and low-income urban neighborhoods, often struggle to access even basic medications.

THE CURRENT STATE OF GLP-1 ACCESS.

The landscape of GLP-1 access in this country mirrors long-standing healthcare inequities. Black (49.9%) and Hispanic adults (45.6%) have the highest obesity rates in the U.S., yet their use of GLP-1 medications for weight management remains disproportionately low.²⁹ Income plays a significant role: people earning over \$250,000 a year are 72% more likely to receive these medications than those earning under \$50,000.³⁰ This disparity is unsurprising, given that the average annual cost of name-brand GLP-1s is approximately \$12,000 without insurance coverage.³¹

Many who could benefit from these medications cannot afford them, and those who can often face other access challenges. These barriers compound existing social drivers of health (SDOH), such as living in food deserts,

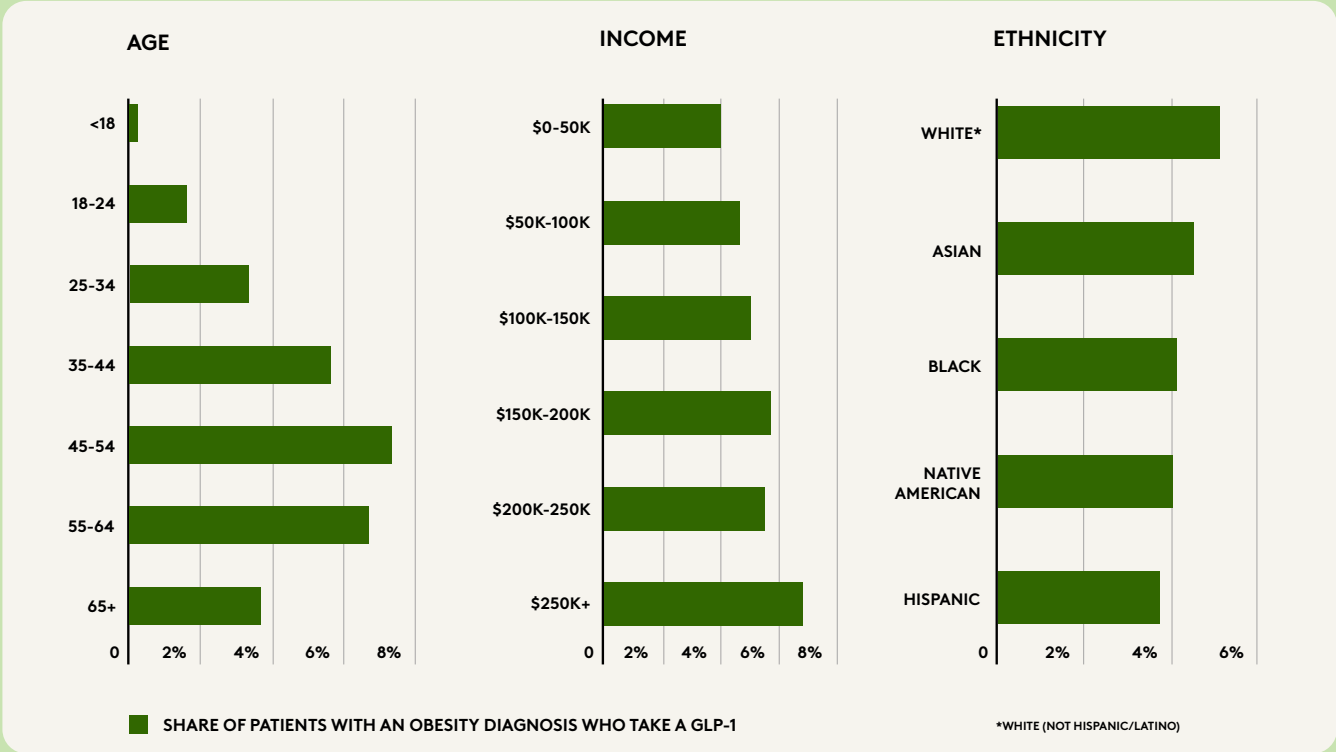
lacking safe spaces for physical activity, or working multiple jobs to make ends meet.

IMPACT ON THE WORKPLACE.

Obesity-related health conditions significantly impact both healthcare spending and workplace productivity. Per employee, annual medical costs are \$2,150 higher for employees with obesity and \$3,590 higher for those with severe obesity compared to healthy-weight employees.³² The impact extends beyond direct healthcare costs: employees with obesity miss an average of 3-6 additional workdays annually (up to 12 days for those with severe obesity) and report decreased on-the-job productivity. Together, these combined factors result in an estimated \$3.38 to \$6.38 billion annually in indirect costs to employers.³³

Currently, only about 42% of large employers cover these medications. Even with insurance, high out-of-pocket costs can make treatment hard to afford, especially for employees earning lower wages.³⁴ Expanding access to effective obesity treatments can enhance workforce health, lower healthcare expenses, and improve productivity, ultimately benefiting employees and an organization's financial health.

Demographic breakdown of GLP-1 use.



Source: IRIS by Real Chemistry | Image Credit: Real Chemistry

The data reveals stark disparities in who can access GLP-1 medications. Looking at patients diagnosed with obesity, clear patterns emerge across income levels, race and ethnicity, and age—highlighting how these breakthrough treatments remain out of reach for many of the populations that could benefit most.

BEYOND MEDICATION ACCESS.

While GLP-1s can offer life-changing results, their effectiveness is often limited when individuals do not follow prescribed treatment plans. Studies show that many people stop using these medications too early in their weight-loss journeys: fewer than half of patients continue treatment after six months, and even fewer stick with them for a year.³⁵

GLP-1s work best when combined with healthy lifestyle changes — the FDA specifically designates these medications as adjuncts to diet and exercise.³⁶ However, many people lack access to the clinical oversight and behavioral guidance needed to make these medications work optimally. Without proper support, individuals can regain lost weight as fat rather than lean muscle, which can lead to a condition called **sarcopenic obesity**.³⁷ The consequences can be severe: individuals with this condition face increased risks of becoming physically frail, developing chronic health conditions, and experiencing shortened lifespans.³⁸

SOLUTIONS THAT WORK.

Bridging the GLP-1 care gap requires innovative approaches that offer behavior change support, flexible clinical protocols, and community-based support networks. Organizations can help drive equitable outcomes by ensuring comprehensive care models are available to all employees, not just high-income populations.

“Employers who invest in comprehensive obesity care that considers the whole picture of employees’ lives are making a strategic decision that benefits their entire organization,” says Cody Fair, Chief Commercial Officer at Noom Health. “Combining GLP-1 medications with robust wraparound supports leads to improved employee health, reduced absenteeism, and measurable returns on investment.”

To address both access and comprehensive support, Noom offers employers two approaches:

Noom Med with Smart^{Rx}

This solution pairs medication management with evidence-based programs that help build healthy habits. Our personalized approach means members can begin with GLP-1s when medically appropriate, while others start with proven, more affordable medications and advance to GLP-1s when needed. This ensures each person receives the right level of care. When members achieve their health goals, we provide support for safely tapering off medications. Our innovative supply-chain approach reduces medication costs for employers while maintaining high-quality care. The impact is clear: For every \$1 spent on the program, employers save \$4.10 through better health outcomes, well-managed medication use, and streamlined care delivery.³⁹

Noom Weight with Employee-Pay Options

This solution focuses on lasting lifestyle changes while making prescription drugs more affordable and accessible. Employees get support for building healthy habits and self-pay access to anti-obesity medications, including oral pills and GLP-1s, via Noom’s GLP-1^{Rx} Program. This approach allows employers to promote employee health and facilitate access to competitively priced medications without directly bearing the costs.

LOOKING FORWARD.

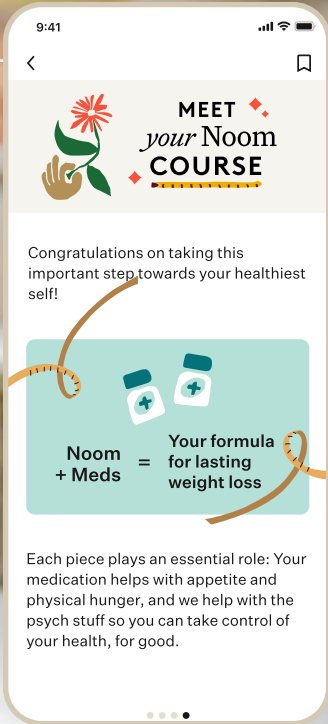
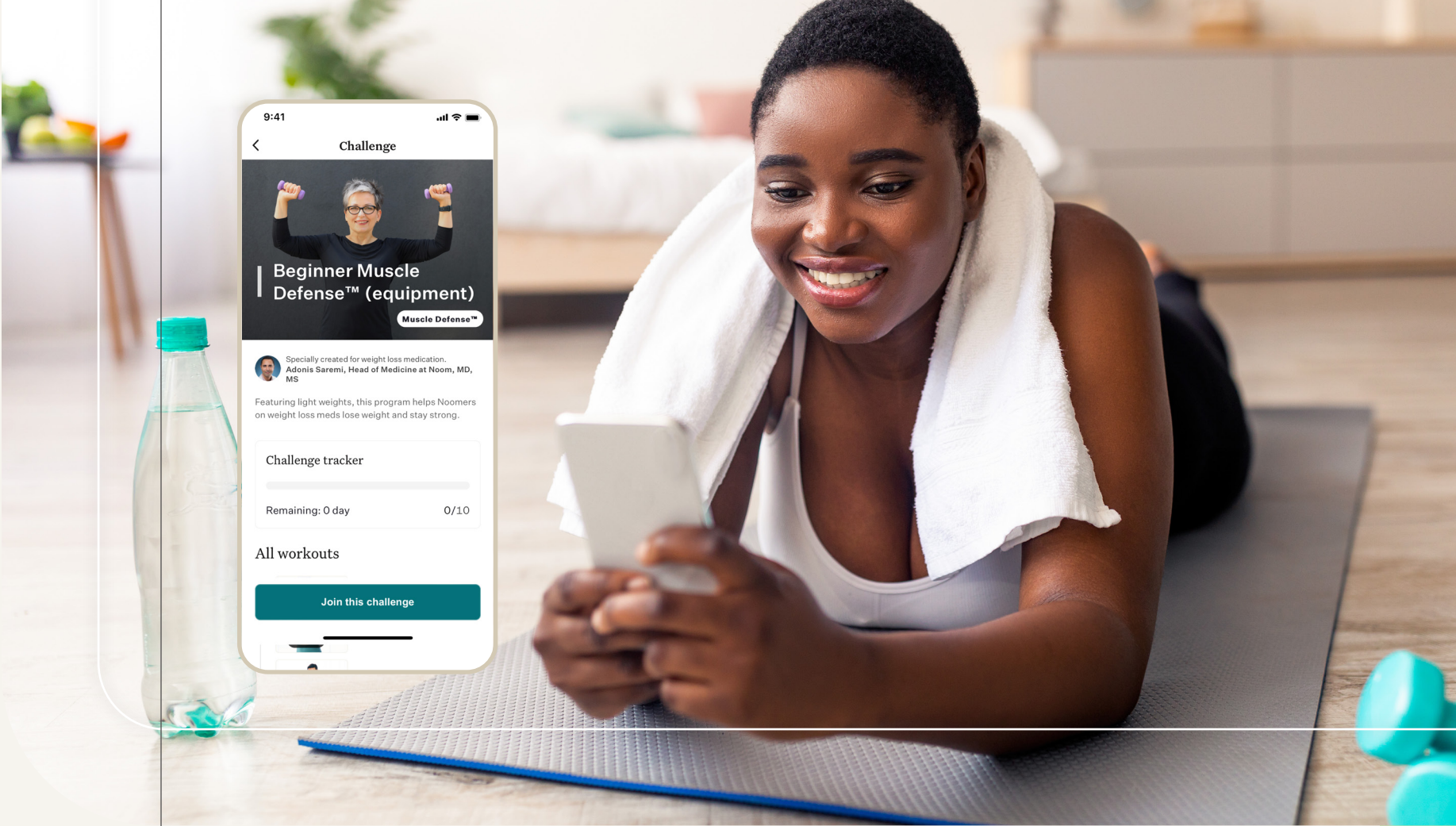
Employers have a powerful opportunity to ensure that these treatments benefit everyone, not just those who can afford them. By championing equitable access, organizations can cultivate a thriving, healthier workforce while amplifying the transformative potential of these treatments to drive lasting, positive public health outcomes.

Noom GLP-1 Companion.

Where mindset meets medication.

KEY FEATURES INCLUDE:

- **Daily support for your weight-loss journey:**
- Practical tips to help you think about nutrition, exercise, and health in ways that work for your life
 - Information presented in clear, jargon-free language
 - Med Tracker to help you stay on course with your medication (95% member adherence)
- **Protein-focused food support:**
- Thousands of high-protein recipes that work with different budgets and cooking skills
 - A daily protein tracker that’s easy to understand and use
 - Welli Meal Planner that adapts to your cultural preferences and schedule



- **Building and keeping muscle (MuscleDefense™):**
- Over 1,000 exercise videos for all body types and fitness levels
 - No expensive equipment or gym memberships are required
 - Resistance-training workouts that fit into your busy life, with members averaging nearly 7 workouts per month
- **Comprehensive support:**
- AI driven tools that learn your routine
 - Coaches trained to help you manage medication side effects
 - Connect with other members using GLP-1 medications
 - Support for medication tapering after you’ve met your weight-loss goals

Now aligned with the FDA’s PDURS framework, making prescription support more accessible to everyone who needs it.

Making nutrition work for everyone.

How Noom boosts employee health literacy for better outcomes.



Despite billions spent annually on workplace wellness in the United States, most programs miss their mark. They target already health-conscious employees while ignoring those facing the most significant health barriers—from food deserts and irregular work schedules to limited transportation options. This disconnect has become even more consequential as employers invest in expensive weight management solutions, including GLP-1 medications. For these investments to succeed, companies must ensure all employees have a firm grounding in nutrition education and health literacy.

DEBUNKING COMMON NUTRITION MYTHS.

In communities with limited access to resources and education, persistent misconceptions about nutrition create additional barriers to health. Many people still wrongly believe eating healthy must be expensive, that all processed foods are harmful, or that snacking is inherently bad. At Noom, we help members discover sustainable ways to eat well within their unique circumstances—whether working with a tight budget, limited time for meal prep, or specific dietary needs. And because we know information alone doesn't create lasting change, we combine this practical nutrition guidance with proven behavior change strategies that work with members' real-world constraints.

WHY NOOM WORKS.

Where traditional programs offer one-size-fits-all solutions that ignore socioeconomic realities, our personalized approach meets employees where they are, whether working multiple jobs, living in food deserts, or balancing cultural food traditions with health goals. This means higher engagement across your workforce—including employees who haven't succeeded with conventional wellness programs. Our behavior change expertise, coupled with our deep understanding of social drivers of health (SDOH), uniquely positions us to support both employees just starting their wellness journey and those more knowledgeable about nutrition.

At Noom, we help members discover sustainable ways to eat well within their unique circumstances.

Color-coding nutrition: That’s Noom Smart.

Noom’s intuitive color system transforms nutrition science into easy-to-use color-coded food groups. By distilling complex dietary guidance into three clear categories, we make healthy eating achievable for members regardless of their health literacy, time constraints, or resources.

GREEN FOODS form the cornerstone of member wellness. These nutrient-dense, budget-friendly options like vegetables, whole grains, and lean proteins help members stay energized and focused, regardless of their schedule or location.

YELLOW FOODS strike the balance between nutrition and satisfaction. Moderate-calorie options like avocados, lean proteins, and whole-grain tortillas encourage mindful portions while respecting diverse cultural preferences and lifestyles.

ORANGE FOODS complete the picture with a practical approach to portion awareness. Rather than restricting access, this category helps members make informed choices that fit their circumstances and resources.



The system adapts to members’ specific needs—for example, automatically adjusting to emphasize protein-rich foods for those on GLP-1 medications. Noom helps create lasting behavior change across your organization by removing common obstacles to healthy eating.



HOW WE DELIVER.

Our approach starts by understanding each employee’s unique circumstances—from work schedules and cultural preferences to financial constraints. We then build a foundation of practical nutrition knowledge through our “Nutrition 101” program, which covers essentials like reading food labels, preparing balanced meals, and understanding the building blocks of proteins, carbohydrates, and fats.

This education comes to life through solutions tailored to real-world challenges. For employees with limited fresh food access, we provide strategies for healthy eating with shelf-stable and frozen options. We offer quick meal solutions that don’t sacrifice nutrients for those managing multiple jobs or tight schedules. And for members from diverse cultural backgrounds, we ensure our guidance respects and incorporates their traditional foods and eating patterns.

Our practical approach extends to common workplace scenarios. When back-to-back meetings derail lunch plans, employees don’t just learn what a healthy meal looks like—they develop specific strategies for planning and preparation. When stress triggers unhealthy eating

patterns, they get proven techniques to manage those moments and build better habits. This support carries through to every aspect of the day, from navigating breakroom snacks to maintaining healthy routines during long shifts.

We provide specialized guidance for employees on GLP-1s and other anti-obesity medications that account for their unique circumstances. Beyond basic education about protein intake and portion control, we help them develop sustainable eating patterns that work within their daily realities—whether they’re dealing with food access challenges, irregular schedules, or cultural dietary preferences. We ensure they understand how their medications work alongside practical lifestyle changes to build lasting habits for long-term success.

MAXIMIZE YOUR BENEFITS INVESTMENT.

Noom’s proven behavior change methods increase wellness program engagement by making healthy habits practical and achievable. We help employees build sustainable health habits that work in their daily lives, leading to better medication adherence, increased benefits utilization, and lasting health improvements across your workforce.

Cultural adaptation: The missing link in employee health programs.

Employers face a critical challenge in today's diverse workforce: making health and wellness programs resonate across varied backgrounds while addressing SDOH. Recent peer-reviewed studies demonstrate that culturally adapted health interventions significantly enhance engagement and health outcomes across diverse populations.

WHY CULTURAL ADAPTATION MATTERS FOR YOUR WORKFORCE.

A 2024 study highlighted a nutrition program tailored to Indigenous communities that incorporated traditional foods like wild rice and maple syrup, achieving an 86% retention rate. Participants cited the program's cultural relevance as key to their sustained engagement.⁴⁷ Similarly, a 2018 study published in the *Journal of the American Medical Association* found that dietary patterns linked to the Southern diet contributed to higher hypertension rates among Black adults.⁴⁸ Addressing such disparities could involve collaborating with communities to adapt traditional recipes to maintain cultural significance—such as using traditional baking methods to reduce added sugars while preserving flavor and heritage. For Hispanic populations with type 2 diabetes, research shows that bilingual materials and culturally familiar foods, particularly when delivered by bicultural registered dietitian nutritionists, markedly improved disease management.⁴⁹



NOOM'S APPROACH TO CULTURAL ADAPTATION.

At Noom, cultural adaptation is at the core of our program design and delivery. We recognize that “healthy eating” looks different in different parts of the world and from one neighborhood to another. We adapt to individual cultural preferences, and our coaches receive specialized training in cultural competency and diverse dietary traditions. The platform includes comprehensive food logging for diverse ingredients and preparation methods, ensuring meal recommendations respect cultural significance while suggesting healthier alternatives.

Our coaches help members maintain healthy habits while honoring important traditions, from Ramadan fasting to Lunar New Year celebrations. They provide practical strategies, such as cooking modifications and flexible scheduling, to support cultural and religious observances while advancing health goals.

THE BOTTOM-LINE IMPACT.

When employers prioritize culturally sensitive programs, they see greater engagement, advance diversity, equity, and inclusion (DEI) goals, and reduce health-related productivity losses. Partnering with Noom enables employers to deliver inclusive wellness initiatives that support all employees, fostering a healthier and more productive workforce.

A digital bridge to address barriers in obesity care.

Telemedicine is transforming obesity treatment by addressing social drivers of health through expanded access, personalized care, and virtual support communities.

Obesity rates are profoundly shaped by social drivers of health (SDOH)—the conditions in which people live, work, and age that influence their health outcomes. Economic stability enables access to nutritious food choices and safe spaces for physical activity. Educational attainment shapes health literacy and nutritional awareness. Built environments determine proximity to grocery stores, recreational spaces, and healthcare facilities. These social and environmental factors pose substantial barriers to obesity prevention and treatment, with their effects disproportionately impacting vulnerable populations.

Traditional obesity care models often struggle to address these fundamental barriers. As employers seek effective strategies for their workforce, telemedicine has emerged as a powerful tool that expands access to care and directly addresses the SDOH that often prevent successful treatment. By bridging gaps in access, education, and support, digital health solutions offer a more equitable and comprehensive approach to weight management.

“Digital health solutions have the potential to transform obesity care, but their impact depends on thoughtful implementation. Our priority is to ensure these solutions are accessible and effective for all members, particularly those who have historically faced the greatest barriers to care,” says Noom Vice President of Payers and Providers Robyn Racheotes.

Telemedicine’s primary strength lies in its ability to address multiple SDOH barriers simultaneously. Research demonstrates that conventional in-person treatment models frequently fail to effectively serve vulnerable populations, particularly those facing transportation challenges, long travel distances, or inflexible work schedules.⁵⁰ By enabling patients to connect with healthcare providers remotely, telemedicine eliminates many obstacles while facilitating more frequent interactions—a factor consistently linked to improved weight management outcomes.

“Digital health solutions have the potential to transform obesity care, but their impact depends on thoughtful implementation.”

ROBYN RACHEOTES
VICE PRESIDENT OF PAYERS AND PROVIDERS
NOOM

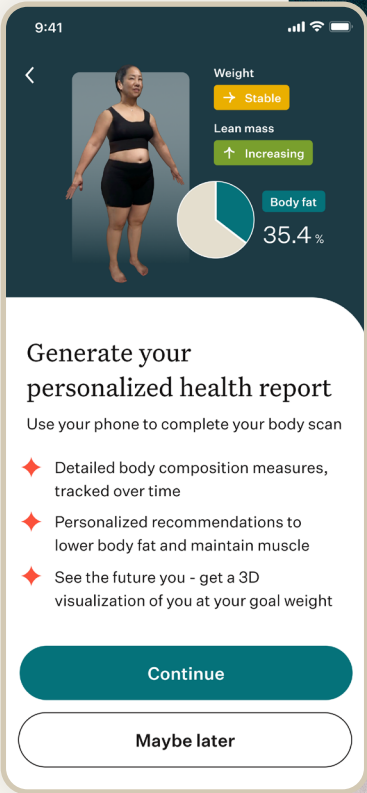
Transform your health journey with Noom’s 3D Body Scan.

Breaking down traditional barriers to health monitoring, Noom’s 3D Body Scan technology brings professional-level health insights directly to where members live. This feature removes common obstacles that often prevent people from accessing advanced health assessments.

KEY BENEFITS:

- ➔ **No transportation needed:** Get detailed health insights without traveling to specialists
- ➔ **Flexible timing:** Complete scans around work schedules and family commitments
- ➔ **No additional costs:** Advanced body analysis included in membership
- ➔ **Clear guidance:** Simple, step-by-step instructions in plain language
- ➔ **Private assessments:** Monitor health progress in your own space
- ➔ **The technology delivers personalized insights including:**
 - Body composition analysis for informed health decisions
 - Essential health indicators like waist-to-hip ratio
 - Evidence-based projections of potential outcomes
 - Contextual peer group comparisons

By bringing professional-grade health monitoring tools directly to members’ homes, we’re working to eliminate traditional gaps in access to advanced health assessment tools. This technology serves all members, regardless of where they live, work hours, or economic situation.



Through virtual consultations, healthcare providers can make nutrition care more accessible and impactful. Digital platforms facilitate engagement by offering intuitive tools that enable users to track their progress and receive timely, personalized feedback.⁵¹ A retrospective analysis of Noom’s mobile health intervention examined data from over 36,000 members and found that higher engagement was strongly associated with greater weight loss. Participants who logged meals at least five times per week lost 8% of their body weight on average, compared to just 3% for less frequent logging.⁵² This highlights how frequent interaction with digital tools can improve adherence and health outcomes.

Technology’s impact extends into addressing physical activity barriers as well. Healthcare providers can use video consultations to assess a patient’s surroundings and recommend exercise routines that are practical and accessible within their specific environment. This adaptability ensures that treatment plans are realistic and tailored to the patient’s context, increasing adherence and the likelihood of sustained lifestyle changes.⁵³

Educational resources and tools within telemedicine platforms enhance patient engagement and support behavior change. Features like self-monitoring tools, digital scales, and skills-building educational sessions help patients understand and adjust their habits. Studies indicate that frequent use of these tools is associated with better adherence and weight management outcomes over time.⁵⁴

A 12-month prospective study of Noom’s digital weight management program found significant improvements in health-promoting behaviors across categories such as physical activity, stress management, and interpersonal relationships. Participants also demonstrated greater health responsibility and better nutrition habits. These changes were associated with significant weight loss and

higher engagement, emphasizing the role of digital tools in fostering sustainable behavior change. Participants engaging with the program achieved an average weight loss of 7.5% of their body weight, demonstrating the potential of digital platforms to drive meaningful health improvements.⁵⁵

However, implementing effective telemedicine programs requires careful consideration of potential challenges. Digital literacy and access to affordable, reliable internet remain significant barriers for some populations. Without thoughtful planning and appropriate support, digital health solutions risk exacerbating existing inequities. Organizations must consider investments in infrastructure, education, and subsidized services to ensure their telemedicine initiatives reach those who could benefit most.⁵⁶ Success requires alignment with broader efforts to address SDOH and reduce health disparities.

Telemedicine offers unique advantages for employers in supporting workforce health. The convenience of remote consultations can reduce time away from work, while the ability to access care from home may increase program participation rates. Adding digital monitoring tools provides opportunities for more consistent engagement with health initiatives, potentially leading to better outcomes and reduced healthcare costs over time.

The integration of telemedicine into obesity treatment programs represents more than just a technological advancement; it provides a framework for addressing the social determinants that underpin health inequities. Its ability to tailor interventions to individual and community needs while simultaneously addressing multiple barriers to care makes it a particularly valuable tool in the fight against obesity and the systemic barriers that perpetuate it. As healthcare continues to evolve, telemedicine’s role in creating more equitable, accessible, and effective obesity care will likely only grow in importance.

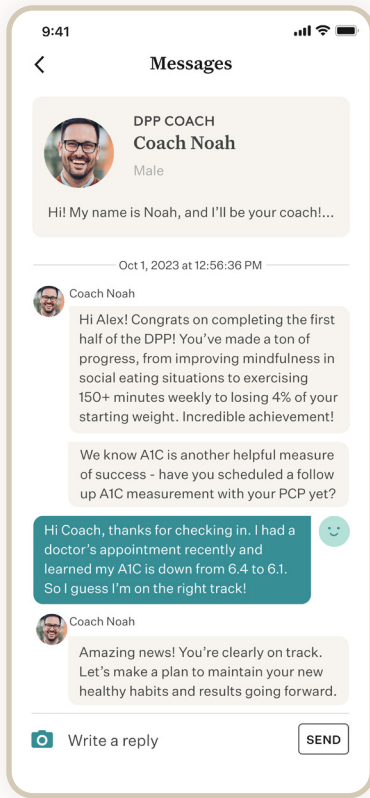
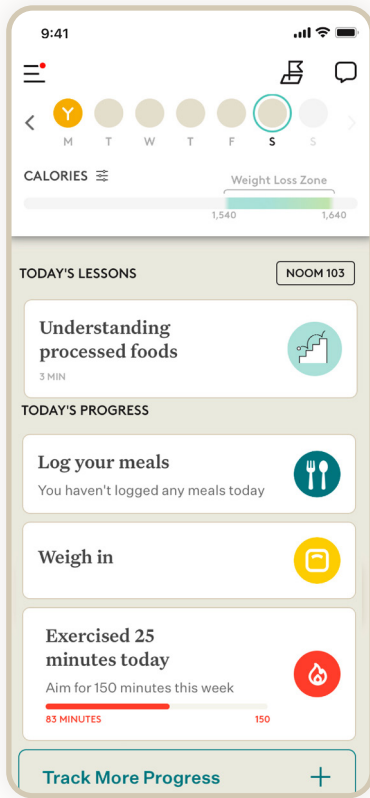
Reframing diabetes prevention.

Digital solutions addressing social barriers could transform diabetes prevention and save employers billions in healthcare costs.

While U.S. employers spend \$245 billion annually on diabetes (\$175 billion in medical and pharmacy costs plus \$70 billion in productivity losses) the most effective prevention tools may not be medical in nature at all.⁵⁷ SDOH—factors like food access, transportation, and work flexibility—impact up to 90% of health outcomes.⁵⁸ Addressing these fundamental barriers could be the key to lasting change for employers looking to reduce diabetes risk and healthcare costs.

SDOH present significant barriers to diabetes prevention. In 2023, 47 million Americans faced food insecurity, making healthy eating choices difficult.⁵⁹ Transportation barriers to care affect approximately 5.8 million Americans annually.⁶⁰ And among employed adults without paid sick leave, 15% report skipping needed medical care because they couldn’t take time off work.⁶¹

This impact is especially concerning given that one in three U.S. adults has prediabetes, with 80% unaware of their condition.⁶² Without intervention, 25% will develop type 2 diabetes within five years, leading to medical costs averaging \$12,022 annually per patient.⁶³



The Noom Diabetes Prevention Program (DPP) helps overcome these barriers. Our CDC-recognized program demonstrates how technology can transform employee health outcomes while acknowledging social and economic realities. The program’s virtual delivery eliminates transportation and scheduling barriers. Employees access personalized coaching, evidence-based curriculum, and peer support through smartphones—anytime, anywhere.

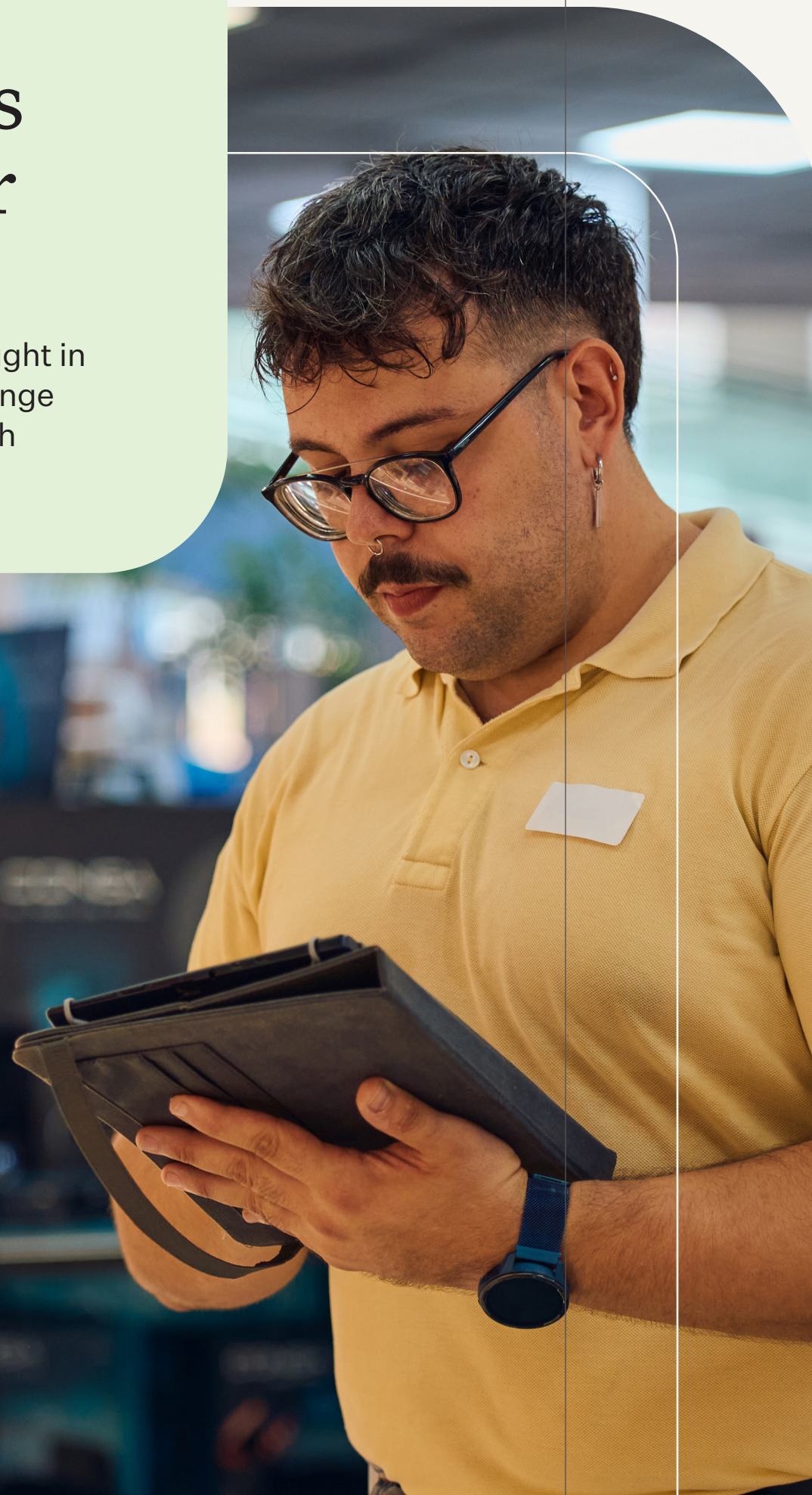
Beyond accessibility, the program addresses core SDOH factors. CDC-trained coaches provide culturally competent guidance on nutrition within budget constraints. The curriculum includes practical strategies for stress management and sleep hygiene. Community features create social support networks traditionally lacking in virtual care.

The results demonstrate both health equity and ROI. Among participants, 64% prevented or delayed the onset of type 2 diabetes. Two-thirds achieved clinically significant weight loss of 5% or more, while program completers showed meaningful reductions in HbA1c levels.⁶⁴ These outcomes translate to reduced healthcare costs, decreased absenteeism, and improved productivity.

As diabetes rates continue to rise, employers have a unique opportunity to combat this epidemic by addressing its root causes. Noom DPP isn’t just a health intervention—it’s a strategic investment in workforce sustainability and business performance.

Breaking barriers through behavior change.

Social isolation and obesity are often caught in a vicious cycle, but Noom's behavior change platform transforms lives by tackling both challenges together.



Social isolation is a critical social driver of health that can intensify struggles with obesity—and obesity, in turn, often deepens social isolation.⁶⁵ Through its proven behavior change curriculum, Noom helps break this cycle. While many wellness solutions focus solely on weight, Noom's psychology-based approach addresses the complex social and behavioral factors impacting physical and mental health.

Weight stigma remains pervasive in society, with a 2018 national survey finding that 34% of U.S. adults reported experiencing or knowing someone who has experienced fat shaming firsthand, rising to 43% among those with obesity.⁶⁶ This widespread stigma contributes to social isolation, with recent research showing that 10.5% of individuals with obesity experience high levels of social isolation and 7.91% report high levels of loneliness, compared to just 8.32% and 5.55%, respectively, among those without obesity.⁶⁷ Such isolation poses significant health risks, correlating with increased chronic illness, depression, and reduced workplace performance.⁶⁸

The downstream effects of social isolation affect every aspect of daily life. This means increased absenteeism, decreased engagement, and elevated healthcare costs in the workplace. These challenges can further exacerbate health conditions like obesity, impacting both individual well-being and organizational performance. Breaking this cycle through targeted interventions strengthens personal health outcomes and workplace resilience.

NOOM'S COMPREHENSIVE APPROACH.

Noom integrates several proven methodologies to address both isolation and obesity. The platform's foundation in cognitive behavioral therapy (CBT) and mindfulness helps members identify and reframe negative thought patterns, build self-compassion, and reduce internalized stigma. A 2021 study of 3,485 Noom Weight participants demonstrated a self-reported 20% increase in mental wellness and a 14% decrease in anxiety levels after six months.⁶⁹

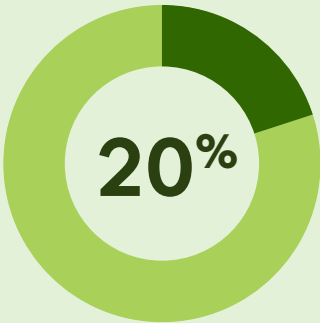
While many wellness solutions focus solely on weight, Noom's psychology-based approach addresses the complex social and behavioral factors impacting physical and mental health.

Beyond individual mental health support, Noom’s platform facilitates peer connections and coaching interactions, creating support networks that combat isolation. Research shows these connections improve both program adherence and outcomes. A 16-week single arm, prospective study revealed participants achieved an average 3.9 kg weight loss, with 36% reaching clinically significant results. Those engaging more frequently with community features showed greater improvements in body image and psychological flexibility.⁷⁰

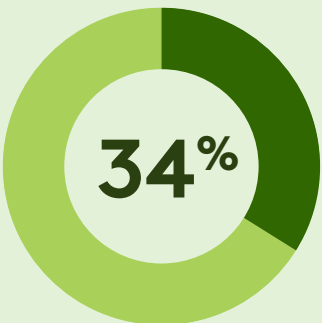
The platform offers customizable wellness programs that combine group coaching with company-wide initiatives. These programs enable employers to build inclusive cultures while supporting employees’ individual health journeys.

Through evidence-based behavior change strategies that address mental and physical well-being, Noom helps organizations boost employee engagement, reduce healthcare costs, and create more resilient communities.

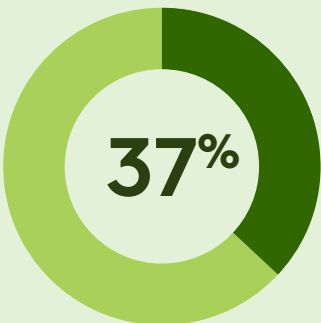
In one study examining Noom Weight’s impact on mental health, respondents reported:



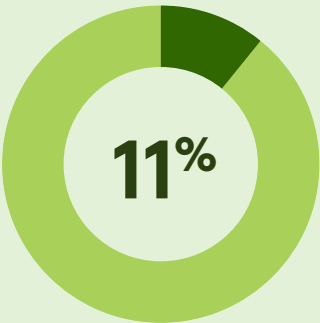
increase in mental wellness⁷¹



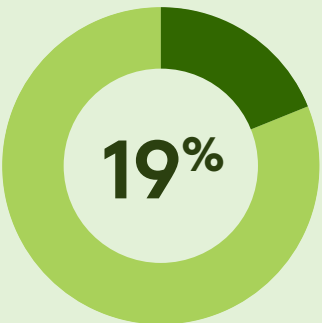
increase in confidence⁷²



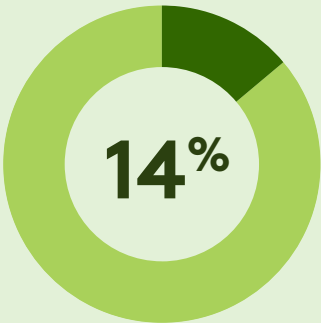
increase in energy⁷³



increase in self-awareness⁷⁴



decrease in stress⁷⁵



decrease in anxiety⁷⁶

Expanding access to obesity care: Noom’s two solutions.

Quality obesity care remains financially and logistically out of reach for many employees. High medication costs, limited pharmacy options, and medication shortages make prescribed treatments especially challenging to obtain. Transportation needs and work schedules create additional obstacles to consistent care. Noom addresses these real-world challenges through two programs designed to meet varying organizational and member needs.

NOOM MED WITH SMART[®]

- Uses step therapy and risk tiering to **optimize treatment paths**
- Streamlines **competitively priced medication access** through **direct sourcing**
- Provides **virtual care and support**
- **Bypasses pharmacy shortages** and access issues
- **Delivers 4.1x ROI*** through reduced healthcare costs

NOOM WEIGHT WITH GLP-1[®] PROGRAM

- **Creates medication pathways** for qualified members
- Connects members to **lower-cost medication options**
- Delivers **virtual behavioral support**
- **Removes geographic barriers** to care

These complementary approaches help organizations provide comprehensive obesity care while removing obstacles that often prevent employees from seeking and maintaining treatment. By considering real-world implementation challenges, both solutions work to create more equitable care delivery across diverse communities and circumstances.

*Based on 2024 third-party analysis by Accorded actuarial firm.

Conclusion.

Social drivers of health (SDOH) significantly impact obesity rates and create barriers to care access. By delivering comprehensive obesity care—including GLP-1 prescription services, medication fulfillment via mail, nutrition education, and diabetes prevention—employers can address health inequities while optimizing healthcare investments.

Noom’s telehealth platform breaks down traditional access barriers, meeting employees where they are. Our solutions combine personalized digital tools, psychology-based support, and convenient clinical services to provide holistic, accessible care. This integrated approach empowers sustainable behavior change across diverse populations, ensuring employees receive comprehensive, evidence-based treatment regardless of socioeconomic circumstances.

To effectively address SDOH in your benefits strategy, consider these three essential factors:



DIGITAL ACCESS

Breaking down barriers through virtual care delivery and app-based tools.



BEHAVIOR CHANGE

Psychology-based coaching, nutrition education, and exercise guidance that adapts to diverse cultural needs and education levels.



COMPREHENSIVE CARE

Integrated clinical services, medication management, and education regardless of location or circumstances.

Ready to learn how Noom can help your organization tackle SDOH and improve health outcomes? Contact our team today to explore solutions tailored to your workforce health strategy.



TAKE THE NEXT STEP WITH NOOM HEALTH.

To learn more about how Noom Health can help organizations drive total population health outcomes, visit us at noom.com/health or email enterprisesales@noom.com.



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